				OMB No. 2040-0	0042 Approval Expires	4/30/07		
≎EPA	ANNUAL D	United States Environmental Protection Agency Washington, DC 20460 ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT						
Name and Address of Journey Ope P.O. Box Tale	Existing Permittee rating, LLC		Name and Kent	Address of Surface	owner Company	1210061		
Locate Well and Section Plat - 640	Outline Unit on	State	ntucky	County Leslie	rand, KY 4176 Permit N KY F			
w	N	Locatie and 7 E W	well in two directions on 3045 ft. frm (N/S)1 ft. from (E/W) E1 ELL ACTIVITY Brine Disposal Enhanced Recovery Hydrocarbon Storage	Line of quarter sec TYPE OF PE	section 3 Township (s of quarter section and section tion. ERMIT al	3 Range 74		
	INJECTION	N PRESSURE	TOTAL VOLUI	ME INJECTED	TUBING CASING (OPTIONAL I	ANNULUS PRESSUF MONITORING)		
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG		
<u> Jan 09</u>	<u>403</u>	815	921					
Fex on	871	900	544	\circ				
Marina	21	100						
Aprilon	899	\$ 7		O				
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Six On			, 1					
No or	718.75	0	15-10					

Certification

attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibliity of fine and imprisonment. (Ref. 40 CFR 144.32)

Date Signed	Name and Official Title (Please type or print)	Signature (
I Mark Formers VIII		Signature	Date Signed
7/12	LASTATION LOCALLY		76.1.
EPA Form 7520-11 (Rev. 8-01)	EPA Form 7520 44 (Paul 2 04)	1 344 / 124m	AFIID

MB No. 2040-0042

Approval Expires 12/31/2011

≎EPA	ANNUAL D	United S	-	n, DC 20460			ORT	
Name and Address of Jetta Operating App P.O. Box 1269 Haz	f Existing Permittee palachia, LLC			Name and A Kentucky	Address of Surface River Coal Comp 269, Hazard, KY	Owner pany	, ,	
Locate Well and Section Plat - 64	l Outline Unit on 0 Acres	Sta Ke	te entucky		County Leslie		Permit Nur KYA0568	
w	N	Loc	cate well in two face cation 3026 ft. f 1 75 ft. from (WELL ACTIVI Brine Disp Enhanced	/4 of 1/4 of 1/4 of directions from (N/S) N (E/W) € L TY	4 of1/4 of S from nearest lines _ Line of quarter set ine of quarter sect TYPE OF PE _ Individual V Area Number of W	of quarter sect section tion. :RMIT		Range 76 Iling unit
	s		Lease Name F	lenry Turne	r	Well Num	ber K-151	
	INJECTIO	N PRESSURE	TO	OTAL VOLUM	IE INJECTED		CASING AN	NULUS PRESSURE
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	Ві	BL	MCF	MINIMUM	PSIG	MAXIMUM PSIG
January-2010	930	950	1044					
February-2010	893.75	950	794					
March-2010	844.44	900	689					
April-2010	762.50	900	744					
May-2010	719.57	800	580					
June-2010	0	0	0					
July-2010	0	0	0					
August-2010	0	0	0			2000		
September-2010	0	0	0					******
October-2010	0	0	0					
November-2010	0	0	0					
December-2010	0	0	0		,			
information is tru	e penalty of law that I that, based on my inq ie, accurate, and comp e and imprisonment. (uiry of those individuals	luals immediat at there are sig	familiar with	hle for obtaining t	ha information	I baliana Al-	-441-
ame and Official Title	(Please type or print)		Signature	++			Data	Signed
David Patterson / Vio				, \ \			f	Signed 28/11

EPA Form 7520-11 (Rev. 12-08)

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United States Environmental Protection Agency

Washington, DC 20460	1 4 4 0 0
ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT	13/0000

Name and Address of	ANNUAL D	ISPOSAL/INJ	ECTION WEL	L MONITOR	ING REPORT	13/0000
Journey C	perating, LLC 169 Hazard,				- Coal Compar Hazard, KY L	
Locate Well and		State		County	Permit I	11/0′√ Number
Section Plat - 640		_ Kei	ntucky e Location Description	Leslie	Permit I KYA	10568
	N	1			ection <u>3</u> Township	G Range 710
├ <i>┼</i> - ├ - ┼		- Locate			of quarter section and	
h-+		Surface	e on2175 ft. frm (N/S) <u>S</u>			
		and 120	SO ft. from (E/W) E	Line of quarter s Line of quarter secti	ection ion.	
w		-	ELL ACTIVITY	TYPE OF PE		
		-	Brine Disposal Enhanced Recovery	Individua	ſ	
		-	Hydrocarbon Storage	Number of W	lells <u>[0</u> 7	
		Lea	ase Name Hanry	Turner	Well Number	K-323
	S					
		THE R. P. LEWIS CO., LANSING, MICH.		-111-	T	
MONTH YEAR		PRESSURE	TOTAL VOLU	ME INJECTED		ANNULUS PRESSURE MONITORING)
	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
<u>Jan 01</u>	Age /		hand)			
He was		Size and				
Maichol	40.00	" j s	; : }	Ĺ,		
Homes	234	£, ** .	15	State of the state		
14 Ai 21						
July Ol	() () () () () () () () () ()	- 1 	2.2	12		
July	₹.,					
Aw or	0	\bigcirc	()			
	Ö	70		, s		
CTV CC	Ž je	3 1				
Name Fil	H10 13		- ,	- Carlo		
	170	Sept.		<u> </u>		
<u> </u>				- 40		
attachments and the information is true possibliity of fine a	nat, based on my inqu , accurate, and comple and imprisonment. (Re	ry of those individuals	Certification s immediately responsere are significant per	ible for obtaining th	ne information, I believ g false information, ind	e that the Sluding the
ame and Official Title (I	۸	stgr	nature Shen		1	te Signed

≎EPA	ΔΝΝΙΙΔΙ Γ		States Environm Washington	n, DC 2046			ODT	12/31/2011
Name and Address o Jetta Operating Ap P.O. Box 1269 Haz	f Existing Permittee palachia, LLC	JOF OSAL/I	143EC HO	Name and Kentuck	Address of Surface y River Coal Comp 269 Hazard, KY	Owner	URT	
Locate Well and Section Plat - 64	f Outline Unit on 6 Acres	j	tate Kentucky		County Leslie		Permit Nu KYA056	
	N		urface Location					
w		_ Lo	ocate well in two urface ocation	directions rm (N/S) <u>S</u> E/W) F	/4 of1/4 of Single from nearest lines Line of quarter sect TYPE OF PE	of quarter section	<u> </u>	Range 76
	· · ·	_ _ _	Brine Disp Enhanced Hydrocarb Lease Name H	Recovery on Storage		/ells <u>67</u>	_{iber} K-32	2
	s injectio	N PRESSURE			ME INJECTED	TUBING	CASING A	NNULUS PRESSURE ONITORING)
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	G BE	JL .	MCF	MINIMUM		MAXIMUM PSIG
January-2010	929	950	95					
February-2010	887.50	950	24.7					
March-2010	842.59	900	0.263					
April-2010	775	900	1					
May-2010	693.48	800	3					
June-2010	0	0	0					
July-2010	0	0	0					***************************************
August-2010	0	0	0					
September-2010	0	0	0					
October-2010	0	0	0					
November-2010	0	0	0			1		
December-2010	0	0	0					
information is tru	e penalty of law that I that, based on my inq e, accurate, and comp and imprisonment. (I	ollete. I am aware th	iduals immediate	amiliar wit	ible for obtaining 41	1 - C 4 * ·		
lame and Official Title David Patterson / Vic			Signature	1)	l l	Signed 28/11

EPA Form 7520-11 (Rev. 12-08)

				OMB No. 2040-	0042 Approval Expires	s 4/30/07
⊕EPA	ANNUAL D		States Environmental Pro Washington, DC 20 NJECTION WE	460	SING PEDADT	
Journey	of Existing Permittee Perating, LLC alc9 Hazard		Name a	nd Address of Surfac		71201
Locate Well ar Section Plat - 6			Kentucky rface Location Descript	lestic	Permit N	lumber 4.568
w	N	Lo	1/4 of1/4 of cate well in two direction rface cation = 20.9 ft. frm (N/S) ILMO ft. from (E/W) \vert \ WELL ACTIVITY Brine Disposal Enhanced Recovery Hydrocarbon Stora	1/4 of	tion. ERMIT	drilling unit
	INJECTION	N PRESSURE	TOTAL VOL	.UME INJECTED	TUBING CASING (OPTIONAL I	ANNULUS PRESSURI
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
Jan. 09	43-8	610	1			
FED. OH	<u> </u>	<i>-</i>	52			
Mach of	9	0	. 			
ROTOGA)	С				
Mins						
JAKON		(*)				

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attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibliity of fine and imprisonment. (Ref. 40 CFR 144.32)

Name and Official Title (Please type or print)		
	Signature	Date Signed
AND CAMORED VP	Han han	2/2/10
EPA Form 7520-11 (Rev. 8-01)		

Washington, DC 20460 ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT							
Name and Address of	f Existing Permittee	ISPOSAL/IN.					
1.0. Rox 19		d. KY 417	Name and Address of Surface Owner Bobby Rex Coots 130004 1702 Similax, KY 41764				
Locate Well and Section Plat - 64	d Outline Unit on O Acres		entucky	County	Permit, N	lumber 405Co8	
1 1 1	N		ce Location Description		ection 3 Township (0 71.	
│	┝╼┣╌┼╼├╌┼╴		e well in two directions	from nearest lines	of quarter section and	G Range IQ	
├ ─┼─├─┼	·	Surface		Line of quarter s	ection	arming unit	
w -		1 1	ELL ACTIVITY	TYPE OF PE			
┠┈┼╌┼	╌┠╌┽╼╠╌┼╴	-	Brine Disposal	Individua	ıl		
-+			Enhanced Recovery Hydrocarbon Storage		Iells 107		
┠╟┼╌┞┼			ease Name Horold		G	91 (~0	
			ase Name [[OFO[O	B. Kice	Well Number	KL- 609	
	S						
	INJECTION	PRESSURE	TOTAL VOLUI	ME INJECTED	TUBING CASING (OPTIONAL I	ANNULUS PRESSURE	
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG	
<u> Dûn 69</u>	693	700	1105				
F1- 91	\$ 5 p	7174	12.45				
Marchai	70?	T) Ajti	- 4	*			
Atom Dr	47.	1 - 1		-			
Mary 30				- 42			
Jungs	Ú)	, ***			
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is well	5000	Ó					
1 22 09	C47.77	750	3415				
Certification							
attachments and to information is true possibliity of fine	hat, based on my inqui e, accurate, and comple and imprisonment. (Re	ry of those individual te. I am aware that th f. 40 CFR 144.32)	is immediately responsi here are significant pen	ible for obtaining th alties for submittin	ne information, I believe g false information, incl	that the luding the	
ame and Official Nitle (Please type or print)	sig	nature		į.	te Signed	
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Date Signed

01/28/11

					OMB No. 2040-004	2 Approv	al Expires	12/31/2011
≎EPA		United	d States Environm Washingto	nental Protecti on, DC 20460	ion Agency			
)ISPOSAL	_		MONITORII	NG REP	ORT	
Name and Address of Jetta Operating App P.O. Box 1269 Haza	f Existing Permittee palachia, LLC			·	ddress of Surface O			
Locate Well and Section Plat - 640	d Outline Unit on 10 Acres		State Kentucky		County Leslie		Permit N KYA05	
	N		Surface Location	•				
		7 -			of 1/4 of Sec			
		1 1	Locate well in two Surface	o directions in	rom nearest lines of	f quarter sec	tion and o	irilling unit
		-	Location 350 oft. f		Line of quarter sec			
					ne of quarter section	·····		
W		E	WELL ACTIVIT		TYPE OF PERM	VIIT		
		-	Brine Disp ✓ Enhanced		Individual ✓ Area			
			Hydrocarb	bon Storage	Number of Wel	lls <u>67</u>		
		- [Lease Name H	larold B. Ric	:e	Well Nur	mber KL-	609
	S							
								
	INJECTIO	N PRESSURE	Tr	OTAL VOLUME	E INJECTED			ANNULUS PRESSURE MONITORING)
MONTH YEAR	AVERAGE PSIG	MAXIMUM PS	SIG BF	BL	MCF	MINIMUN	VI PSIG	MAXIMUM PSIG
January-2010	801	950	2416					
February-2010	758.93	850	1809					
March-2010	694.81	750	1609					
April-2010	637.50	700	1537					
May-2010	562.22	650	1134					
June-2010	0	0	0					
July-2010	0	0	0					
August-2010	0	0	0					
September-2010	0	0	0					
October-2010	0	0	0					
November-2010	0	0	0					
December-2010	0	0	0					
			Certifica	ation				
I certify under the	e penalty of law that I h	have personally e	examined and am t	familiar with t	the information sub	omitted in this	s documer	nt and all
information is true	that, based on my inquie, accurate, and comp	juiry of those indi- plete. I am aware	ividuals immediate that there are sign	alv reenancih	da far abtaining sky			
possibility of fine	and imprisonment. (F	Ref. 40 CFR 144.3	32) \	\ \	\		 ,	uding are

David Patterson / Vice President

Name and Official Title (Please type or print)

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V	EPA

United States Environmental Protection Agency
Washington, DC 20460

Ø EPA	ANNUAL D	ISPOSAL/INJ	ECTION WEL		NG REPORT	
Name and Address of Journey Op	Existing Permittee		Name and	Address of Surface	Owner Cool Company	ot i
P.O. Box 1	aug Hazar	d. KY 4170	2 P.O.	Rox yrbd'	Hazard, KY L	41702
Locate Well and Section Plat - 640	Outline Unit on	Ke	intucky	Leslie	Permit N KYA	lumber UHU8
	N	Surfac	e Location Descriptio /4 of 1/4 of		ction 3 Township	_
					of quarter section and	
F+-F+		Surface	e on <i>2930</i> ft. frm (N/S) <u>]</u>	Line of quarter se	ection 1 a \ 1	1005
		and/5	45ft. from (E/W) E	Line of quarter section	on. (7)(1) 0 0 1
w		E WI	ELL ACTIVITY Brine Disposal	TYPE OF PER		
	- 		Enhanced Recovery Hydrocarbon Storag	Area		
		_1				15 000
	s		ase Name Hanry	J wrier	Well Number	44.101
						·
MONTH YEAR	INJECTION AVERAGE PSIG	PRESSURE		IME INJECTED		ANNULUS PRESSURE MONITORING)
Jin 69	751	MAXIMUM PSIG るり	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
Feb 29			2-			
PO 101011	804	275	25			
AUM109	<i>©</i> ,⊀4	El A.	`3			
May OA	<u> </u>					
JUN DA	$\mathcal{L} = \mathcal{O}$	0	ð			
504.09	0					
Ry G						
Sext Co		0				
<u>CC4 09</u>	020	6 ° .				
Novon	610,50	$\frac{0}{1}$	431			
Dec 09	L+5,16	900	-77			
			Certification			
attachments and the information is true possibility of fine a	hat, based on my inqui , accurate, and comple and imprisonment. (Re	iry of those individual ete. I am aware that th ef. 40 CFR 144.32)	s immediately respon nere are significant pe	sible for obtaining th nalties for submittin	e information, I believe g false information, inc	that the luding the
me and Official Tyle (_	sigi	nature	. \	Į.	te Signed
A Form 7520-11 (Rev. 8	3-01)		SAND (BITO			2/2/10

OMB No. 2040-0042

Approval Expires 12/31/2011

Well Number KF-701

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United States Environmental Protection Agency Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Name and Address of Existing Permittee Jetta Operating Appalachia, LLC P.O. Box 1269 Hazard, KY 41702

Name and Address of Surface Owner Kentucky River Coal Company P.O. Box 269 Hazard, KY 41702

Locate Well and Outline Unit on Section Plat - 640 Acres W

State County Permit Number Kentucky Leslie KYA0568 Surface Location Description 1/4 of 1/4 of $1/4 \text{ of} \underline{\hspace{1cm}} 1/4 \text{ of Section} \underline{3}$ Township GLocate well in two directions from nearest lines of quarter section and drilling unit Location 230 ft. frm (N/S) 1 Line of quarter section and B45 ft. from (E/W) E Line of quarter section. WELL ACTIVITY TYPE OF PERMIT Brine Disposal Individual Enhanced Recovery ✓ Area Hydrocarbon Storage Number of Wells 67 Lease Name Henry Turner

	INJECTIO	N PRESSURE	TOTAL VOL	UME INJECTED	TUBING CASING / (OPTIONAL I	ANNULUS PRESSURE MONITORING)
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
January-2010	863	925	338			
February-2010	839.46	950	269			
March-2010	837.04	925	201			
April-2010	751.79	850	196			
May-2010	695.65	775	122			
June-2010	0	0	0			
July-2010	0	0	0			
August-2010	0	0	0			
September-2010	0	0	0			
October-2010	0	0	0			
November-2010	0	0	0			
December-2010	0	0	0			

Certification

I certify under the penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibliity of fine and imprisonment. (Ref. 40 CFR 144.32)

Name and C	Official	Title	(Please	type or print)
David Pat	terson	/ Vic	e Presid	lent

ature Side

Date Signed 01/28/11

United States Environmental Protection Agency

⊗EPA	ANNUAL D	ISPOSAL/INJ	Washington, DC 2046 ECTION WEL		ING REPORT	
Name and Address of	Existing Permittee		Name and	Address of Surface	Owner	_
P.O. Bux	1249 Haza	rd, KY 417C	d 1.0.	Box 269	Ccal Compon Hazard, Ky	41702
Locate Well and Section Plat - 640		- Kei	Ntucky e Location Descriptio	Lestie	Permit N	lumber 10568
	N I I I	1	/4 of 1/4 of	1/4 of 1/4 of Se	ection 2 Township	C Range 74
	—	Surfac		Line of quarter s Line of quarter secti		310°004
			Brine Disposal Enhanced Recovery Hydrocarbon Storag	e Number of W	l Vells 67	
		Le	ase Name William	n G. Cornett	- Well Number	KF-716
	S					
	INJECTION	I PRESSURE	TOTAL VOLU	IME INJECTED	TUBING CASING (OPTIONAL	ANNULUS PRESSUR MONITORING)
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
Jan 109	685	760	732	C		
Feb 29	787	842	To start			
Maryon	743	230	115			
Aprilo	1 2 "		479	Common Co		
Mu of	, 5 Z	·	'	C		
JA463	0	0	0	(3)		
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Tire	765	U	2441			
attachments and th	nat, based on my inqu	in of those individual	Certification			
possibliity of fine a	and imprisonment. (R	ete. I am aware that the	ere are significant pe	sible for obtaining th nalties for submittin	ne information, I believe g false information, inc	that the luding the
me and Official Title (F	Please type or print)	Sign	nature			te Signed

\$EPA

United States Environmental Protection Agency Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Name and Address of Existing Permittee Jetta Operating Appalachia, LLC

Name and Address of Surface Owner

P.O. Box 1269 Hazard, KY 41702			269 Hazard, KY 4		COOY
Locate Well and Outline Unit on Section Plat - 640 Acres	State Kentud	icky	County Leslie	Permit No KYA05	
N	Surface	e Location Descriptior	L		
	1/4	4 of 1/4 of 1/4	of 1/4 of Se	ction $\frac{2}{}$ Township G	Range 76
╽ ┝╌┽╼┞╸┽ ╼┠ ╌┽╼┞╸┽╼	Locate	well in two directions for			
╽ ├─┼─├─┼─┠─┼─├─┼─	Surface				
	Location	on 3800ft. frm (N/S) N	Line of quarter se	ection	
		ちft. from (E/W) W Lii			
W	- ,		TYPE OF PER		
╷ ├─ ┼─├─ ╎ ─┠─┼─├─┼─		Brine Disposal Enhanced Recovery	Individual		
	I I +	Hydrocarbon Storage	Number of We	ells 67	
┆ <u>┡</u> ╃╼┡-╅╼ ┠ -╃╼┡-╅╼		· William G. C		1999(1-0-07) of State of such	
	Lea	ise Name William G. C	ornett	Well Number KF-	716
s					
INJECTION P		TOTAL VOLUME	E INJECTED	TUBING CASING A (OPTIONAL N	NNULUS PRESSURE IONITORING)
INJECTION P MONTH YEAR AVERAGE PSIG	PRESSURE MAXIMUM PSIG	TOTAL VOLUME	E INJECTED MCF	TUBING CASING A (OPTIONAL N MINIMUM PSIG	NNULUS PRESSURE IONITORING) MAXIMUM PSIG
MONTH YEAR AVERAGE PSIG				(OPTIONAL N	IONITORING)
MONTH YEAR AVERAGE PSIG January-2010 865	MAXIMUM PSIG	BBL		(OPTIONAL N	IONITORING)
MONTH YEAR AVERAGE PSIG January-2010 865 February-2010 872.50	MAXIMUM PSIG 910	2604		(OPTIONAL N	IONITORING)
MONTH YEAR AVERAGE PSIG January-2010 865 February-2010 872.50 March-2010 803.33	MAXIMUM PSIG 910 925	2604 2159		(OPTIONAL N	IONITORING)
MONTH YEAR AVERAGE PSIG January-2010 865 February-2010 872.50 March-2010 803.33 April-2010 719.64	910 925 875	2604 2159 1862		(OPTIONAL N	IONITORING)

Certification

I certify under the penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (Ref. 40 CFR 144.32)

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Name and Official Title (D)			
Name and Official Title (Please type or print)	Signature		Date Signed
David Patterson / Vice President			01/28/11
	- July ha	ر سه	01/28/11

July-2010

August-2010

October-2010

November-2010

December-2010

September-2010

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MB No. 2040-0042 Approval Expires 4/30/07

€EPA

Name and Address of Existing Permittee

United States Environmental Protection Agency
Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

N WELL MONITORING REPORT

Name and Address of Surface Owner

Kentucky River Coal Company

P.	Journey Operating, LLC O. Box 1269, Hazard, KY41702	Kentucky River Coal Company 131 P.O. Box 269, Hazard, KY 47102
	Locate Well and Outline Unit on Section Plat - 640 Acres	Kentucky Lestic Permit Number KYAU568
	N I I I I I I I I I I I I I I I I I I I	Surface Location Description 1/4 of 1/4 of 1/4 of Section 3 Township Range 7(4)
		Locate well in two directions from nearest lines of quarter section and drilling unit Surface Location UDft. frm (N/S) Surface Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Location Locat
w	E	WELL ACTIVITY TYPE OF PERMIT Brine Disposal Individual
		Enhanced Recovery Area Hydrocarbon Storage Number of Wells
	s	Lease Name Honry Turner Well Number K-150

	INJECTION	I PRESSURE	TOTAL VOLU	IME INJECTED	TUBING CASING . (OPTIONAL I	ANNULUS PRESSURE MONITORING)
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
Jan 09	775	775	5	0		
	O	0	0	0		
March 39	1 3	11 p m 3 p 4	w.c'			
FO INYA	C ii	77.5	351)	Ö		
May va	- 1			C		
June 29	ر	<u></u> و	0	0		
2-14-51	-/-)			
Musi vi	Û					
Lait of	<u> </u>	J O		y		
Cet on	9	j j)			
Nov (3	0	0	0	egistens 2 y		
Per of	(**************************************	-	1		

Certification

attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (Ref. 40 CFR 144.32)

Name and Official Title (Please type or print)	Signature	
	Signature	Date Signed
Wants Fattoness VA	1 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	-11-
	JAN I STON	2/2/10
FPA Form 7520-14 (Paul 9-04)		

OMB No. 2040-0042

Approval Expires 12/31/2011

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United States Environmental Protection Agency Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Name and Address of Existing Permittee Jetta Operating Appalachia, LLC P.O. Box 1269 Hazard, KY 41702

Name and Address of Surface Owner Kentucky River Coal Company P.O. Box 269, Hazard, KY 41702

	Section Plat - 640 Acres
	N
w	
	S

State County Permit Number Kentucky Leslie KYA0568 Surface Location Description 1/4 of 1/4 of 1/4 of Section $\frac{3}{2}$ 1/4 of ____ Township G Locate well in two directions from nearest lines of quarter section and drilling unit Location 1100 ft. frm (N/S) 5 Line of quarter section and HOD ft. from (E/W) E Line of quarter section. WELL ACTIVITY TYPE OF PERMIT Brine Disposal Individual Enhanced Recovery ✓ Area Hydrocarbon Storage Number of Wells 67 Lease Name Henry Turner Well Number K-150

					TUBING CASING	ANNULUS PRESSURE
	INJECTIO	N PRESSURE	TOTAL VOL	LUME INJECTED	(OPTIONAL I	MONITORING)
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
January-2010	0	0	0			
February-2010	701.92	950	3170			
March-2010	884.07	920	788			
April-2010	814.82	900	1448			
May-2010	764.35	800	408			
June-2010	0	0	0			
July-2010	0	0	0			
August-2010	0	0	0			
September-2010	0	0	0			
October-2010	0	0	0			
November-2010	0	0	0			
December-2010	0	0	0			···

Certification

I certify under the penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (Ref. 40 CFR 144.32)

Name and	l Official	Title	(Please	type	or print)

David Patterson / Vice President

dignature

Date Signed 01/28/11

.C.FPΔ

United States Environmental Protection Agency Washington, DC 20460

	ANNOAL DI	SPOSAL/INJI	ECTION WELI	_ MONITOR	ING REPORT	
Name and Address of E Journey Open			Name and	Address of Surface	Owner	
P.O. BOX 1749	Hazard, KY 41-				ad, Dearborn	, Michigan
Locate Well and (Section Plat - 640			ntucky Location Description	county Leslie	Permit N	
	N	1/	•		ection <u>33</u> Township	t Range 74
├ 	╼┠╌┽╼┝╌┽╺	Locate			of quarter section and o	
-++-	╼ ┠ ╌┽╼┝╸┽╺ ╼ ┠ ╌┽╼┝╸┽╺	Surface Locatio	n2950ft. frm (N/S) <u>S</u> 15ft. from (E/W) W I	Line of quarter s	ection \3\00	08
w			LL ACTIVITY	TYPE OF PE		
	-	-	Brine Disposal Enhanced Recovery	_ Individua	ıl	
 	- -+- -+-		Enhanced Recovery Hydrocarbon Storage			
		Lea	ise Name Furdson	Coal Compan	Well Number	K-158
	S				J	
	INJECTION	PRESSURE	TOTAL VOLU	ME INJECTED		ANNULUS PRESSURE MONITORING)
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
Jan 07	770	<u> </u>	238	<u> </u>		
te0 07	271	150	232			
March 09	F 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	AD B	137	<i>2</i> - ,		
Apr. (0)	9.73		36			
Hay o'r				<i>:</i>		
July 09		· · · · · ·				
JULY ON	Ĵ	0	0	-		
AUY 34	()	0	·)			
SHOT UT		:2		. 8		
<i>0</i> 8 09				-		
Novoi	Ü	Ö	Vanor	- !		
Dec 39	7					
			Certification			
	at, based on my inqu accurate, and compl nd imprisonment. (R	iry of those individuals	s immediately respons	sible for obtaining t nalties for submitti	he information, I believe ng false information, inc	that the luding the
ame and Official Title (F		Sign	Aux Comm		1	te Signed 2/2/10

OMB No. 2040-0042 Approval Expires 12/31/2011

.C.ED∧		United State	es Environmental Prot Washington, DC 204			
VEFA	ANNUAL D	ISPOSAL/INJ			ING REPOI	RT
Name and Address of Jetta Operating App P.O. Box 1269 Haz	f Existing Permittee palachia, LLC		Name an Fordsor	d Address of Surface a Coal Company nerican Road Dearb	Owner	
Locate Well and Section Plat - 64	Outline Unit on Acres	State Kent	ucky	County Leslie		rmit Number YA0568
	N	Surfac	ce Location Description			
			/4 of 1/4 of	1/4 of 1/4 of S	ection 23 Towns	ship H Range 76
		- Locate	e well in two direction	is from nearest lines	of quarter section	and drilling unit
-+		Surfac		_		
<u> </u>			on 2015 () ft. frm (N/S) _ 2015 ft. from (E/W) W			
w - -		ļ ———	ELL ACTIVITY	TYPE OF PE		
		_	Brine Disposal	Individua	al	
		_ <u>'</u>	Enhanced Recovery Hydrocarbon Storag		67	
		_ '			vells <u>07</u>	
		Le	ase Name Fordson C	oal	Well Numbe	r K-158
	S					
		N PRESSURE	TOTAL VOL	UME INJECTED	TUBING CA (OPTIC	SING ANNULUS PRESSURE NAL MONITORING)
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PS	GIG MAXIMUM PSIG
January-2010	0	0	0			
February-2010	0	0	0			
March-2010	0	0	0			
April-2010	0	0	0			
May-2010	0	0	0			
June-2010	0	0	0			
July-2010	0	0	0			
August-2010	0	0	0			
September-2010	0	0	0			
October-2010	0	0	0			
November-2010	0	0	0			
December-2010	0	0	0			
information is tru	mat, based on my ind	have personally examir uiry of those individua olete. I am aware that t Ref. 40 CFR 144.32)	IS immediately resnor	isible for obtaining +	ha information 1 h	altana de a de
ame and Official Title	(Please type or print)	A	\\			
David Patterson / Vic		S	nature	/		Date Signed

≎EPA	ANNUAL DISPOSA	nited States Environmental Protectio Washington, DC 20460 AL/INJECTION WELL I Name and Add	n Agency	PORT IN O O O
Name and Address of E. Journey Operation P.O. Box 1269.	risting Permittee ing, UC Hazard, KY 41702	Hayes	dress of Surface Owner Lewis 139, Hyden, KY 41	
Locate Well and O Section Plat - 640 A		Kentucky (County Leslie	Permit Number KYAU5U8
	N	Surface Location Description 1/4 of 1/4 of 1/4 o	f1/4 of Section <u></u> 3 T	ownship H Range 76
	-	Locate well in two directions fro Surface Location 450 ft. frm (N/S) 5 L and 100 ft. from (E/W) E Line	Line of quarter section	ction and drilling unit
W	E	WELL ACTIVITY Brine Disposal Enhanced Recovery Hydrocarbon Storage Lease Name Stanky Wi	TYPE OF PERMIT Individual Area Number of Wells 47	mber K-162

	· · · · · · · · · · · · · · · · · · ·	INJECTION			IME INJECTED	TUBING CASING (OPTIONAL I	ANNULUS PRESSURE MONITORING)
MONTH	YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
200	69	U10	730	A commence			
Febru	<u> </u>	913		ا			
1101	h 07	1	Heri.		3		
(h, c)	PC	يد سو ۳ بريد دريد دريد	end	Soft			
NUL	01	-		a _{2,10}			
5016	p q	<u> </u>	0	- 3	=1,		
Julij	01				275		
Aug	01	<u>(</u>)		()	34+ 3		
e I	CH	\mathcal{O}	0				
Cor	<u>C</u> 3	2.7 2.7			* <u>-</u>		
Noi	[]	0	0	0	0.50		
1.16	(1)	*					

Certification

attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibliity of fine and imprisonment. (Ref. 40 CFR 144.32)

Name and Official Title (Please type or print)		
The prince special prince	Signature	Date Signed
DAVIS PATTONSON		_1 _1
	ALD drown	2/2/10
EPA Form 7520-11 (Rev. 8-01)		

					OMB No. 2040-0042	Approval Expires	12/31/2011
≎EPA		Unite	d States Environm Washingto	ental.Protect n, DC 20460	ion Agency		
VELH	ANNUAL C	ISPOSAL	_		MONITORING	REPORT	
Name and Address of Jetta Operating App. P.O. Box 1269 Haza	Existing Permittee alachia, LLC			Name and A Hayes Lew	ddress of Surface Own	er	
Locate Well and Section Plat - 640			State Kentucky	<u> </u>	County Leslie	Permit N KYA05	
	N		Surface Location	•	***************************************		
					of 1/4 of Section		
- 			Surface Location (/55) ft. (rm (N/S) 5	om nearest lines of qu Line of quarter sectione of quarter section.		Irilling unit
w		ε	WELL ACTIVI	TY	TYPE OF PERMIT		
			Brine Disp		Individual V Area Number of Wells	67	
		-	Lease Name S	tanley Wilso	on, ET UX	Well Number K-1	52
<u> </u>	S						
- Charles							
	INJECTIO	N PRESSURE	T	OTAL VOLUMI		TUBING CASING A (OPTIONAL N	ANNULUS PRESSURE MONITORING)
MONTH YEAR	AVERAGE PSIG	MAXIMUM P	SIG B	BL	MCF	MINIMUM PSIG	MAXIMUM PSIG
January-2010	0	0	0				
February-2010	0	0	0				
March-2010	0	0	0				
April-2010	0	0	0				
May-2010	0	0	0				
June-2010	0	0	0				
July-2010	0	0	0				<u> </u>
August-2010	0	0	0				
September-2010	0	0	0				
October-2010	0	0	0				
November-2010	0	0	0				Marie Andrews
December-2010	0	0	0				
			Certifica	ation			
information is true	tnat, based on my ind	ury of those ind plete. I am aware	ividuals immediat that there are sic	alv rasnonsit	the information submit le for obtaining the in Ities for submitting fal	formation I halisus	41

Signature

EPA Form 7520-11 (Rev. 12-08)

David Patterson / Vice President

Name and Official Title (Please type or print)

Date Signed

01/28/11

				OMB No. 2040-00	042 Approval Expires	4/30/07
≎EPA	ANDULAL	V	Environmental Protect Vashington, DC 20460)		
Name and Address of I	ANNUAL D	ISPOSAL/INJE			ING REPORT	Λ.
Journey opera	aing, LLC		1 1	Address of Surface	Owner	1310010
P.O. Box 17	49, Hazard	KY41702	i _		ss. KY 41777	171
Locate Well and		State		County	Permit N	
Section Plat - 640			HUCKY Location Description	Leslie	RYA	0568
	N I I I	1/4	of 1/4 of 1/	/4 of 1/4 of Se	ection 3 Township	Range 7(o
<u> </u>	- 	Locate v			of quarter section and o	
	╼┠╌┼╼┼╸┼╸	Surface	1724	•		
<u> </u>		Location and U/O	n 1736 ft. frm (N/S) 1) ft. from (E/W) F 1	Line of quarter s Line of quarter sect	ection	
w			LL ACTIVITY	TYPE OF PE		
		_	Brine Disposal	Individua	ıl	
	_		Enhanced Recovery	Area		
	_		Hydrocarbon Storage			
		Leas	se Name Harold B	1. Rice, et al	Well Number	<u> </u>
	S					
	INJECTION	J PRESSURE	TOTAL VOLUM		TUBING CASING	ANNULUS PRESSUR
MONTH YEAR	INJECTION AVERAGE PSIG	PRESSURE	TOTAL VOLUI		(OPTIONAL F	MONITORING)
		MAXIMUM PSIG	BBL	ME INJECTED MCF	TUBING CASING (OPTIONAL I	ANNULUS PRESSUR MONITORING) MAXIMUM PSIG
MONTH YEAR Janoa Feu og	AVERAGE PSIG				(OPTIONAL F	MONITORING)
Janos	AVERAGE PSIG	MAXIMUM PSIG	1043		(OPTIONAL F	MONITORING)
Jan 09 Ev 09	AVERAGE PSIG	MAXIMUM PSIG	1043		(OPTIONAL F	MONITORING)
Janos En os Marches	AVERAGE PSIG	MAXIMUM PSIG	1043 1043 1043		(OPTIONAL F	MONITORING)
Janoa Evog Machea Nachea	AVERAGE PSIG	MAXIMUM PSIG	1043 1043 1043		(OPTIONAL F	MONITORING)
Janoa Roong Marchea Ma	AVERAGE PSIG	MAXIMUM PSIG	1043 722	MCF	(OPTIONAL F	MONITORING)
Jan 09 Reb 09 March 09 March 09 May 09 June 09	AVERAGE PSIG	MAXIMUM PSIG	1043 922	MCF	(OPTIONAL F	MONITORING)
Jan 09 Reb 09 March 09 March 09 May 09 June 09	AVERAGE PSIG	MAXIMUM PSIG	1043 922	MCF	(OPTIONAL F	MONITORING)
Jan 09 Reb 09 March 09 March 09 May 09 June 09	AVERAGE PSIG	MAXIMUM PSIG	1043 922	MCF	(OPTIONAL F	MONITORING)
Jono9 Feb 09 Marchen Marchen Marchen Marchen June 09	AVERAGE PSIG	MAXIMUM PSIG	1043 922	MCF	(OPTIONAL F	MONITORING)
Jono9 Feb 09 Marchen Marchen Marchen Marchen June 09	AVERAGE PSIG	MAXIMUM PSIG	1043 122 122 123 124 125 125 125 125 125 125 125 125 125 125	MCF	(OPTIONAL F	MONITORING)

attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibliity of fine and imprisonment. (Ref. 40 CFR 144.32)

		$\overline{}$	
Name and Offical Title (Please type or print)	Signature	ALTER	Date Signed
EDA Form 7520 44 (Day 0.04)			

Date Signed

01/28/11

					OMB No. 2040-0042	2 Approval Expires	12/31/2011
≎EPA		United Sta	tes Environm Washingto	nental Protect on, DC 20460	ion Agency		
VEFA	ANNUAL C	DISPOSAL/IN.			MONITORIN	IG REPORT	
Name and Address of Jetta Operating App	f Existing Permittee palachia, LLC			Name and A Harlan Coo	ddress of Surface Ov	wner	
P.O. Box 1269 Haza	ard, KY 41702			P.O. Box 9	Yeaddiss, KY 417	77	
Locate Well and Section Plat - 640		State Ken	ntucky		County Leslie	Permit N KYA05	
Section Flat - 040	N Acres		ace Location	Description	Lesite	KIAO	108
			1/4 of 1	/4 of 1/4	of 1/4 of Secti	ion 3 Township G	Range 76
		— Loca	te well in two	o directions f	rom nearest lines of	quarter section and	drilling unit
<u> </u>		Surfa		/N/e/ N	_ Line of quarter sect		
	·- -+-+-+	1	400 ft. from		_ Line of quarter section ne of quarter section		
w		E V	WELL ACTIVI	TY	TYPE OF PERM	IIT	
<u> </u>		_	Brine Disp		Individual		
 		_	∠ Enhanced Hydrocart	Recovery	✓ Area Number of Well	is 67	
<u> </u>		_ ,		Harold B Ric			20
			.ease manie .	latold B Kic	e, ETAL	Well Number K-3	39
	S						
	INJECTIO	ON PRESSURE	т	OTAL VOLUMI	E INJECTED		ANNULUS PRESSURE MONITORING)
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	В	BL	MCF	MINIMUM PSIG	MAXIMUM PSIG
January-2010	0	0	0				
February-2010	0	0	0				
March-2010	733.33	750	400				
April-2010	710	800	1084				
May-2010	651.09	750	707				
June-2010	0	0	0				
July-2010	0	0	0				
August-2010	0	0	0				
September-2010	0	0	0				
October-2010	0	0	0				
November-2010	0	0	0				
December-2010	0	0	0				
			Certifica	ation			
I certify under the	e penalty of law that I I	have personally exam	ined and am	familiar with	the information subr	mitted in this docume	ont and all
information is true	that, based on my inque, accurate, and comp	plete. I am aware that	als (mmeuia) there are sid	ely responsit Initioant pena	ole for obtaining the alties for submitting i	information, I believe false information, inc	that the luding the
possibility of fine	and imprisonment. (I	Ref. 40 CFR 144.32)		\ \			-

Sonature

David Patterson / Vice President

Name and Official Title (Please type or print)

2/2/10

	existing Permittee Hing, LLC 199, Hazard, K	······································	Kent	Rox gray +	Coal Company Tazard, KY 41	702
Locate Well and C Section Plat - 640			tucky Location Descriptio			0548
		Surface Location and \1730		ns from nearest lines	tion.	
	-	} -	Brine Disposal Enhanced Recovery Hydrocarbon Storag			
	s	Leas	se Name Felix 🖰	s. Turner	Well Number	KF-355
		N PRESSURE	TOTAL VOL	.UME INJECTED	TUBING CASING (OPTIONAL	ANNULUS PRESSUR MONITORING)
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
1000	<u> </u>	100	Ö			
161 00				, , , , , , , , , , , , , , , , , , ,		
Marinol	273	2-,				
HAN U		197.	<u> </u>			
				1		
July 09	<u></u>	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
No co						
Hy O	7	()	(_)			
1 1 10		0	13")			
00 700 No 100 100 100 100 100 100 100 100 100 10	(2.1			p.4		
00 09 Nev 09	٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠	,	\			
PO 700 NO 000 PO 000			Certification			

Date Signed

01/28/11

<u> </u>					OMB No. 2040-0042	Approval Expires	12/31/2011
≎EPA		United St	ates Environm Washingto	ental Protecti n, DC 20460	on Agency		
VLIA	ANNUAL D	ISPOSAL/IN	IJECTIOI	WELL	MONITORIN	G REPORT	
Name and Address of I Jetta Operating Appa P.O. Box 1269 Haza	alachia, LLC			Kentucky I	ddress of Surface Ow River Coal Compan 69 Hazard, KY 417	y	
Locate Well and Section Plat - 640		Star Ke	te entucky		County Leslie	Permit N KYA05	
	N	Sur	face Location	•		0	
-+		Sur	ate well in two face ation 2715 ft. f 1730 ft. from (directions fr rm (N/S) N E/W) E Lir	of1/4 of Secti rom nearest lines of Line of quarter section	quarter section and ion	
w		E	WELL ACTIVIT		TYPE OF PERM	IT	
	╼┠╌┽╼┞╸┽╺	-	Brine Disp		│ Individual		
-+- -+		-	t .	on Storage	Number of Well	s <u>67_</u>	
 	_	-	Lease Name F	elix G. Turn	er	Well Number KF	-355
<u> </u>	S						
	INJECTION	PRESSURE	To	OTAL VOLUME	E INJECTED		ANNULUS PRESSURE MONITORING)
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	В	3L	MCF	MINIMUM PSIG	MAXIMUM PSIG
January-2010	0	0	0				
February-2010	0	0	0				
March-2010	0	0	0				
April-2010	0	0	0				
May-2010	0	0	0				
June-2010	0	0	0				
July-2010	0	0	0				
August-2010	0	0	0				
September-2010	0	0	0				
October-2010	0	0	0				
November-2010	0	0	0				
December-2010	0	0	0				
			Certifica	ation	-		
information is true	penalty of law that I h that, based on my inqu e, accurate, and comp and imprisonment. (F	iiry of those individ lete. I am aware th	luals immediat at there are sic	elv responsit	le for obtaining the	information I helieve	that the

David Patterson / Vice President

Name and Official Title (Please type or print)

OMB No. 2040-0042 Approval Expires 4/30/07 United States Environmental Protection Agency **⊕EPA** 13/00/19 Washington, DC 20460 ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT Name and Address of Existing Permittee Name and Address of Surface Owner Journey Operating, LLC P.O. Box 1269 Hazard, KY 41702 Kentucky River Coal Company P.O.Bcy dug, Hazard KY 41702 County Permit Number KYRU5U8 Locate Well and Outline Unit on Kontucky 1 estil Section Plat - 640 Acres Surface Location Description N 1/4 of ____1/4 of Section ______ Township & Range 7U Locate well in two directions from nearest lines of quarter section and drilling unit Location 1575ft. frm (N/S) N Line of quarter section and 1500 ft. from (E/W) E Line of quarter section.

WELL ACTIVITY

Ε

Brine Disposal Individual Enhanced Recovery ✓ Area Hydrocarbon Storage Number of Wells 67 Lease Name Felix Turner Well Number

TYPE OF PERMIT

TUBING -- CASING ANNULUS PRESSURE INJECTION PRESSURE TOTAL VOLUME INJECTED (OPTIONAL MONITORING) MONTH YEAR **AVERAGE PSIG** MAXIMUM PSIG BBL MCF MINIMUM PSIG MAXIMUM PSIG 41211 301 5,50

Certification

attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (Ref. 40 CFR 144.32)

Name and Official Title (Please type or print)	Signature	7	210-	Date Signed
EPA Form 7520-11 (Rev. 8-01)				4410

W

s

OMB No. 2040-0042

Approval Expires 12/31/2011

9	E	P	Α
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United States Environmental Protection Agency

Washington, DC 20460 ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Name and Address of Existing Permittee Jetta Operating Appalachia, LLC P.O. Box 1269 Hazard, KY 41702

Name and Address of Surface Owner Kentucky River Coal Company P.O. Box 269 Hazard, KY 41702

Kentucky	Leslie	Permit Number KYA0568			
Locate well in two directions from nearest lines of quarter section and drilling unit Surface Location 1575 ft. frm (N/S) Line of quarter section and 1500 ft. from (E/W) E Line of quarter section.					
WELL ACTIVITY Brine Disposal Enhanced Recovery Hydrocarbon Storage Lease Name Felix Turner	TYPE OF PERMIT Individual Area Number of Wells 67 Well Nu	nber KF-624			
	Locate well in two directions fro Surface Location 1575 ft. frm (N/S) 14 L and 1500 ft. from (E/W) E Line WELL ACTIVITY Brine Disposal F Enhanced Recovery Hydrocarbon Storage	1/4 of1/4 of1/4 of0			

	INJECTIO	N PRESSURE	TOTAL VOLU	ME INJECTED	TUBING CASING ANNULUS PRESSURE (OPTIONAL MONITORING)		
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG	
January-2010	779	950	3				
February-2010	92.31	800	6				
March-2010	823.15	850	0				
April-2010	787.32	900	0				
May-2010	729.57	800	0				
June-2010	0	0	0				
July-2010	0	0	0				
August-2010	0	0	0				
September-2010	0	0	0				
October-2010	0	0	0				
November-2010	0	0	0				
December-2010	0	0	0				

Certification

I certify under the penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (Ref. 40 CFR 144.32)

Name and Official Title (Please type or print)	Siphature \		Date Signed
David Patterson / Vice President	and la	an)	01/28/11

United States Environmental Protection Agency Washington, DC 20460

VEFA	ANNUAL D	ISPOSAL/INJ	ECTION WELL	L MONITOR	ING REPORT	
Name and Address of E	Existing Permittee		Name and Kentu	Address of Surface	Coal Compan	7U
	e9 Hazard		P.O.	. Box 269	Hazard, KY 41	1702
Locate Well and (Section Plat - 640	Outline Unit on Acres		intucky	County	Permit No	umber 0568
ГТТ	N	Surface 1/	ce Location Description		ection <u>3</u> Township (7 71
					ection <u> </u>	
-+		Surface	e			
		- Location	on 1315 ft. frm (N/S) <u>5</u> 15 ft. from (E/W) E L	Line of quarter sect	section 300	10
w		1 1	/ELL ACTIVITY	TYPE OF PER		
<u> </u>			Brine Disposal	Individual K	ıl	
<u> </u>			Hydrocarbon Storage		vells <u>(4</u> 7	
		Le	ase Name Henru		Well Number	KF 1,21
L	s	·		- WILL	1	11 00.1
New York	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ 	I PRESSURE	TOTAL VOLU	IME INJECTED	TUBING CASING A (OPTIONAL N	ANNULUS PRESSURE MONITORING)
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
-611 07	750	800				
Tev xi	100	<u> 193 </u>	O			
Machoi		22				
100109A		6.25		, 		
May 29	1	-		No.		
7 NO 09			0			
JUL-) 29	. 0	o ₄ })			
Aug 09		0	[[]			
Spec on	0			, or		
aci ca		- Segar		-		
NW 09	0	Ti Ti	- Andrew Company			
120 09				* .		
		1	Certification			
possibliity of fine a	and imprisonment. (Re	ry of those individual etc. I am aware that the ef. 40 CFR 144.32)	s immediately respons here are significant per	lible for obtaining the	the information, I believe ng false information, incl	that the luding the
ame and Official Nitle (F	•	Sig	nature		Dat	te Signed
LAVID PATT	ierzy Arj		Jan) brook	\sim	7	2/2/10

OMB No. 2040-0042 Approval Expires 12/31/2011

Ω EDA		United State	es Environmental Prot Washington, DC 2046			
WEFA	ANNUAL D	ISPOSAL/INJ			NG REPORT	
Name and Address of Jetta Operating App P.O. Box 1269 Haza	Existing Permittee alachia, LLC		Name and Kentuck	d Address of Surface cy River Coal Comp x 269 Hazard, KY 4	Owner any	
Locate Well and Section Plat - 640		State Kenti	uckv	County Leslie	Permit KYA	Number
Section Flat - 640	N		e Location Description		KIA	7300
		1	/4 of 1/4 of	1/4 of 1/4 of Se	ction 3 Township	G Range 76
 		— Locate	well in two direction	s from nearest lines	of quarter section and	d drilling unit
<u> </u>		Surfac	e on 1375 ft. frm (N/S)	S Line of guarter s	action	
			15 ft. from (E/W) E			
w		E w	ELL ACTIVITY	TYPE OF PER	RMIT	
			Brine Disposal Enhanced Recovery	Individua	I	
<u> </u>		- i	Hydrocarbon Storag	-	ells <u>67</u>	
		— Le	ase Name Henry Tur	ner	Well Number Kl	F-627
L	s					
	INJECTIO	N PRESSURE	TOTAL VOL	UME INJECTED		ANNULUS PRESSURE MONITORING)
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
January-2010	0	0	0			1
February-2010	0	0	0			
March-2010	0	0	0			
April-2010	0	0	0			
May-2010	0	0	0			
June-2010	0	0	0			
July-2010	0	0	0			
August-2010	0	0	0			
September-2010	0	0	0			
October-2010	0	0	0			
November-2010	0	0	0			
December-2010	0	0	0			
information is tru- possibliity of fine	e, accurate, and comp and imprisonment. (I	N	Is immediately respor	isible for obtaining th	a information I halia	ve that the
ame and Official Title David Patterson / Vic		sig	nature		1	Oate Signed
/ ,•		. 11	\	/	i	01/28/11

		United State	- F			
≎EPA	ΔΝΝΙΙΔΙ Τ	١	ES Environmental Protein Washington, DC 20460	60	···	· anil
Name and Address of	Existing Permittee	ISPOSAL/INJE	Name and	Address of Surface C	NG REPORI	1310014
Journey Ope P.C. Box 1		rd, KY 41702	$R = \begin{pmatrix} K \cdot R \cdot R \cdot R \end{pmatrix}$	-	lazard, KY 4	ITAL
Locate Well and	Outline Unit on	State		County	Permit N	lumber
Section Plat - 640) Acres N		NHULKY se Location Description	Lestie	KYF	AUGLe 8
					ection 🙎 Township (
		Locate Surface		; from nearest lines o	of quarter section and d	trilling unit
	_	Location	on (RB ft. frm (N/S) N D ft. from (E/W) E 1	Line of quarter se	ection	
w			ELL ACTIVITY	TYPE OF PER		
			Brine Disposal	Individual	ł	
++-+-		-	Hydrocarbon Storage	e Number of We		
	- - - - -		ase Name Felix			KF 707
	S	_				
700.0	INJECTION	N PRESSURE	TOTAL VOLU		TUBING CASING	ANNULUS PRESSURE
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL BBL	JME INJECTED MCF	(OPTIONAL N	MONITORING) MAXIMUM PSIG
Jan oi	7/12	716	416		William	MAXIMUM F GIG
Per 01	e _H	372	F-y			
Moren 69	21.	and the second				
Ayni o	329	\$	1 - 1	- 10 - 10		
Muy of						
July 21		0	0			
July 24	0	1)	3	÷"		
Au) 24	0		0_			
14 C9	Ü	0	0_			
CC1 C3	2013		**************************************			
IC WM	0	0	0			
	0		0	-		
			Certification		<u> </u>	
possibliity of fine a	and imprisonment. (Re	iry of those individuals	c immediately	sible for obtaining th nalties for submitting	e information, I believe g false information, inc	that the luding the
me and Official Title (F		Sign	nature			te Signed
JANIE TAILE	3160~3 AL		Jana hors	$\overline{}$	7	2/2/10

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United States Environmental Protection Agency Washington, DC 20460

	ANNUAL D	ISPOSAL/INJ	JECTION W	ELL	MONITOR	ING REF	PORT	
Name and Address of Jetta Operating App P.O. Box 1269 Haza	alachia, LLC		Ken	tucky R	dress of Surface iver Coal Comp 9 Hazard, KY 4	Owner bany 11702	3110	1 4
Locate Well and	Outline Unit on	State		T	County		Permit N	
Section Plat - 640	Acres		tucky ce Location Descr	intlan	Leslie		KYA05	68
[N I I I		1/4 of 1/4 of	-	of 1/4 of Se	ection 8 T	ownebin G	Range 76
		Surfac	e well in two direcce ion 085 ft. frm (N/ 9D ft. from (E/W)	tions fro	om nearest lines Line of quarter s	of quarter sec		
w 		— E v	VELL ACTIVITY		TYPE OF PE	RMIT		
			Brine Disposal Enhanced Recovered Hydrocarbon St	•	Individua ✓ Area Number of W			
		L	ease Name Felix T	urner		Well Nu	mber KF-	707
	S	N PRESSURE	TOTAL	VOLUME	INJECTED			ANNULUS PRESSURE
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	VOLUME	MCF	UMINIMU		MAXIMUM PSIG
January-2010	0	0	0		nioi	MINIMO	IN FOIG	MAXIMUM PSIG
February-2010	0	0	0					
March-2010	0	0	0					
April-2010	0	0	0					
May-2010	0	0	0					
June-2010	0	0	0					
July-2010	0	0	0					
August-2010	0	0	0					
September-2010	0	0	0					
October-2010	0	0	0					
November-2010	0	0	0		111000			***************************************
December-2010	0	0	0					
information is tru	e penalty of law that I I that, based on my inq e, accurate, and comp and imprisonment. (I	uiry of those individua lete. I am aware that	als immediately res	ar with ti	e for obtaining ti	ha information	a I boliovo	that the
ame and Official Title		Si	mature	7			Dat	e Signed
David Patterson / Vic	e President		/ \	/	\		0.0	1/20/11

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United States Environmental Protection Agency

Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT Name and Address of Existing Permittee Name and Address of Surface Owner

Journey Operating, LLC P.O. Box 1269 Hazard, KY	Name and Address of Surface Owner K.R.C.C P.C. Box Aleq Hazard, KY 41701
Locate Well and Outline Unit on Section Plat - 640 Acres	State County Permit Number KYHO548
N	Surface Location Description 1/4 of 1/4 of 1/4 of 1/4 of Section Township & Range TU
	Locate well in two directions from nearest lines of quarter section and drilling unit Surface Location 2000ft. frm (N/S) \(\int\) Line of quarter section and 2175ft. from (E/W) \(\int\) Line of quarter section.
W	WELL ACTIVITY TYPE OF PERMIT Brine Disposal Individual Enhanced Recovery Area Hydrocarbon Storage Number of Wells
s	Lease Name William G. Cornett Well Number KF 109

		INJECTION	I PRESSURE	TOTAL VOLI	TOTAL VOLUME INJECTED		ANNULUS PRESSURE MONITORING)
MONTH	YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
Jan	09	733	800	967			
Fev	09	781	430	135			
1. Paris	fon	(,		= 71			
Azn	101		2.30	*			
May	01		2	1.1.8			
マルフ	09	0	0	0			
	<u> 10 j</u>	5	J		-		
Aug	04	D	2	(2)	·		
<u> </u>	59	0	<u> </u>	Ö			
001	Ca .	Ü	Section 1		N.		
Niss	24	0					
	01	C	C	C			

Certification

attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibliity of fine and imprisonment. (Ref. 40 CFR 144.32)

Name and Official Title (Please type or print)	Signature	Date Signed
SAVIS PARTON VA.	Austona	2/2/10
EPA Form 7520-11 (Rev. 8-01)		

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United States Environmental Protection Agency Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Name	and Address of Existing Permittee
Jetta	Operating Appalachia, LLC
	Box 1269 Hazard, KY 41702

Name and Address of Surface Owner Kentucky River Coal Company P.O. Box 269 Hazard, KY 41702

County

Permit Number

Locate Well and Outline Unit on Section Plat - 640 Acres	State Kentucky	County Leslie
	Surface Location Description	of1/4 of S om nearest lines Line of quarter s
	Brine Disposal Enhanced Recovery Hydrocarbon Storage Lease Name William G. Co	Individu Area Number of V

State

KYA0568 ection 2 $\operatorname{\mathsf{Township}} G$ Range 76 of quarter section and drilling unit section tion.

RMIT al Vells 67

Well Number KF-709

		INJECTION PRESSURE		TOTAL V	OLUME INJECTED	TUBING CASING ANNULUS PRESSURE (OPTIONAL MONITORING)		
MONTH YEA	R AVERA	GE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG	
January-2010	0	()	0				
February-2010	0	()	0				
March-2010	0	0		0				
April-2010	0	6)	0				
May-2010	0	0		0				
June-2010	0	0		0				
July-2010	0	0		0				
August-2010	0	0		0				
September-2010	0	0		0				
October-2010	0	0		0				
November-2010	0	0		0				
December-2010	0	0		0				

Certification

I certify under the penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibliity of fine and imprisonment. (Ref. 40 CFR 144.32)

Name and Official Title	(Please type or print)
David Patterson / Vio	ce President

Signature

Date Signed 01/28/11

United States Environmental Protection Agency Washington, DC 20460

WEPA	ANNUAL D	ISPOSAL/INJ	ECTION WELI	, L MONITORI	NG REPORT	
Name and Address of Journey Ope	rating, LLC	WN/ .l.m	I K.R.	Address of Surface	4	,
	49 Hazar	d, KY 41702 State	P.O. 1	Box 249	Hazard KY	41701
Locate Well and Section Plat - 640		<u> K</u>	e Location Description	<u> </u> Leslie	KYA	lumber OJUS
	N I I I	1	/4 of 1/4 of 1	/4 of 1/4 of Se	ction <u>2</u> Township	
		Locate		from nearest lines	of quarter section and	drilling unit
		Locatio	on=2025 ft. frm (N/S) S	Line of quarter se	ection	316014
w		1 1	Oft. from (E/W) W	ine of quarter section	J	
		_	Brine Disposal	Individual		
		1	Enhanced Recovery Hydrocarbon Storage	Mumber of W	ells (47	
		Le.	ase Name Henry		Well Number	KF-797
<u> </u>	s					
					TUBING CASING	ANNULUS PRESSURE
MONTH YEAR	AVERAGE PSIG	PRESSURE MAXIMUM PSIG	TOTAL VOLUI		(OPTIONAL	MONITORING)
Jan 09	123	740	15.7	MCF	MINIMUM PSIG	MAXIMUM PSIG
ELM	1-1-1	300		* -		
March of	1. 250	10				
April Da		11/200	مز ن ا			
May or	- ; .	,	1 %	-		
PO UNC	(_)	\mathcal{O}	\mathcal{O}			
July 09	Ú.	<u>)</u>	<u> </u>			
Aug 69	0	0	\mathcal{O}	Strong.		
Seyr-09	<u> </u>					
(ct 09			s	e e e e e e e e e e e e e e e e e e e		
Nov 09	74143	O	1313			
Dec 09/	(92,41)	160	1371	, ,		
			Certification			
	hat, based on my inqu e, accurate, and comple and imprisonment. (R		s immediately respons nere are significant per	ible for obtaining th nalties for submittin	ne information, I believe g false information, inc	e that the cluding the
Asia PA Form 7520-11 (Rev.	ax Chain	Sing	nature arraw	\sim	1	te Signed インル

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United States Environmental Protection Agency Washington, DC 20460

VLIA	ANNUAL D	ISPOSAL/IN	JECTION 1	WELL	MONITOR	ING REF	PORT	
Name and Address of Jetta Operating App P.O. Box 1269 Haza	alachia, LLC	Villa	K	entucky F	ddress of Surface River Coal Comp 69 Hazard, KY	oany	1310	1014
Locate Well and		Stat Ke	e ntucky		County Leslie		Permit No KYA056	
Section Plat - 640			face Location Des	scriptior	Desire		KIAOS	00
	N I I		_1/4 of1/4 o	of 1/4	of 1/4 of Se	ection 2T	ownship G	Range 76
		Loc:	ate well in two di		om nearest lines			rilling unit
├- -		Surf						
		Loca	ation ²⁰²⁵ ft. frm 940 ft. from (50)	(N/S) <u>S</u>	Line of quarter s	ection		
w			WELL ACTIVITY	V) W LIF	TYPE OF PE			
**		E	Brine Disposa	al	Individua			
	ŢŢŢ	_	✓ Enhanced Re-		✓ Area			
		-	Hydrocarbon	Storage	Number of W	/ells <u>67</u>		
		_	Lease Name Henr	ry Turner		Well Nu	ımber KF-1	797
L	S S							
	INJECTION	N PRESSURE	TOTA	AL VOLUME	INJECTED			NNULUS PRESSURE
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL		MCF	MINIMU	JM PSIG	MAXIMUM PSIG
January-2010	810	850	1864					
February-2010	799.46	850	1467					
March-2010	728.33	780	1313					
April-2010	655.36	750	1207					
May-2010	603.91	680	1330					
June-2010	249.50	268	150					
July-2010	246	256	169					
August-2010	256.75	272	176					
September-2010	259.50	265	164		-			
October-2010	255	265	106		,			
November-2010	246	260	446					······································
December-2010	254	258	981					
information is tru possibliity of fine	e penalty of law that I i that, based on my inqi e, accurate, and comp and imprisonment. (I	uiry of those individ lete. I am aware tha	uals immediately	miliar with	de for obtaining t	be information	n I baliava	that the
lame and Official Title			Signature	$\top \top$		7	Dat	e Signed
David Patterson / Vic	e President		1 \ .	. \/		1	0	1/28/11

United States Environmental Protection Agency Washington, DC 20460 ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT Name and Address of Existing Permittee 13001 Name and Address of Surface Owner Journey operating, LLC Hayes Lewis 7.0. Por lake Hazard, KY 41702 P.O. Box 159, Hyden, KY 41749 County Permit Number Locate Well and Outline Unit on Section Plat - 640 Acres Kentucky Lestic KYAO 5LOS Surface Location Description Ν 1/4 of ___ 1/4 of Section 3 Township H Range 74 1/4 of Locate well in two directions from nearest lines of quarter section and drilling unit Location 415 ft. frm (N/S) 8 Line of quarter section and 1150 ft. from (E/W) W Line of quarter section. WELL ACTIVITY W TYPE OF PERMIT Brine Disposal Individual Enhanced Recovery X Area __ Hydrocarbon Storage Number of Wells 107 Lease Name Fordson Coal Company Well Number S TUBING -- CASING ANNULUS PRESSURE INJECTION PRESSURE TOTAL VOLUME INJECTED (OPTIONAL MONITORING) MONTH YEAR **AVERAGE PSIG** MAXIMUM PSIG BBL MCF MINIMUM PSIG MAXIMUM PSIG 24 29

Certification

attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibliity of fine and imprisonment. (Ref. 40 CFR 144.32)

Name and Official Title (Please type or print) Au. > Arrows VA	Signature	Date Signed
FDA F 7500 44 (m)		

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OMB No. 2040-0042

Approval Expires 12/31/2011

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United States Environmental Protection Agency

Washington, DC 20460 ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Name and Address of Existing Permittee Jetta Operating Appalachia, LLC P.O. Box 1269 Hazard, KY 41702

Name and Address of Surface Owner Hayes Lewis P.O. Box 159 Hyden, KY 41749

	Locate Well and Outline Unit on Section Plat - 640 Acres
	N
W	E
	S

State County Permit Number Kentucky Leslie KYA0568 Surface Location Description 1/4 of 1/4 of 1/4 of _ _ 1/4 of Section 23 Township H Range 76 Locate well in two directions from nearest lines of quarter section and drilling unit Location 475 ft. frm (N/S) 5 Line of quarter section and 1/50 ft. from (E/W) W Line of quarter section. WELL ACTIVITY TYPE OF PERMIT Brine Disposal Individual Enhanced Recovery ✓ Area Hydrocarbon Storage Number of Wells $\underline{67}$ Lease Name Fordson Coal Co. Well Number KL-372

	INJECTION PRESSURE		TOTAL VOL	TOTAL VOLUME INJECTED		TUBING CASING ANNULUS PRESSURE (OPTIONAL MONITORING)	
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG	
January-2010	930	990	1687				
February-2010	907.14	950	1255				
March-2010	851.85	900	928				
April-2010	757.14	950	1183				
May-2010	645.65	700	1108				
June-2010	0	0	0				
July-2010	0	0	0				
August-2010	0	0	0				
September-2010	0	0	0				
October-2010	0	0	0				
November-2010	0	0	0				
December-2010	0	0	0				

Certification

I certify under the penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (Ref. 40 CFR 144.32)

Name and Official	Title	(Please type or print)
David Patterson	/ Vic	e President

Synature

Date Signed

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United States Environmental Protection Agency

⊗EPA	ANNUAL D		Washington, DC 20460 ECTION WELL		ING REPO	RT	
Name and Address of Journey Opero P.C. Box 15	Name and Dew Yeado	Name and Address of Surface Owner Dewey Lewis Yeaddiss, KY 4777 County Permit Number					
Section Plat - 640 Acres			intucky	Leslic	1	KYAUSUS	
	N N	1	e Location Description		2	0 -	
		1/	well in two directions	4 of 1/4 of Se	ection <u>5</u> Town	nship G Range 74	
		Surface Location	on 1150 ft. frm (N/S) <u>D</u> Oft. from (E/W) W L	Line of quarter s	ection ion.	n and drilling unit	
w		E WE	ELL ACTIVITY	TYPE OF PER			
			Brine Disposal Enhanced Recovery	Individua	ı!		
			Hydrocarbon Storage		/ells	442	
	╼┠╸┽╼┞╸┽╴	Lea	ase Name Fordson (M Commone	Well Numbe	er KI - 420	
<u> </u>	s			an Campano			
	INJECTION PRESSURE		TOTAL VOLUM	TOTAL VOLUME INJECTED		TUBING CASING ANNULUS PRESSURE (OPTIONAL MONITORING)	
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM F	SIG MAXIMUM PSIG	
Jan 09	591	759	634				
Fev og	11/27	క ్రేస్	7] - j	in a			
Marzn og	211		733				
April 39	77%	Ji.	- 1 m	7			
May 09	J	`-		***			
July 39	<i>ව</i>	<u></u>	0	1. M 1. L			
J. 13 29	\circ		± -				
Aug 09	0	0	0	, ·.			
(10 muse)	Ü	0	0	/ A4			
001 01	<u> </u>	2	5				
Nov 39	0	0	0				
PG 29J		Ů,)			
			Certification			<u> </u>	
possibliity of fine a	ind imprisonment. (Re	ry of those individuals ite. I am aware that th af. 40 CFR 144.32)	s immediately responsi ere are significant pen	ble for obtaining th alties for submittin	ne information, l ig false informati	believe that the on, including the	
Davis Pairs		alai	Au one	<u>\</u>		Date Signed	
A Form 7520-11 (Rev. 8	-01)					_1	

Date Signed

01/28/11

				O	MB No. 2040-0042	Approval Expires	12/31/2011		
O EDA		Unite	ed States Environm	nental Protection on, DC 20460	Agency				
≎EPA	ANNUAL D	ISPOSAL	_		ONITORIN	G REPORT			
Name and Address of Jetta Operating Ap P.O. Box 1269 Haz	f Existing Permittee palachia, LLC			·	ess of Surface Ow				
Locate Well and Section Plat - 64	1 Outline Unit on		State Kentucky	F	ounty Leslie	Permit Nu KYA05			
Section Flat - 64			Surface Location Description			J6			
	N		1/4 of 1/4 of 1/4 of1/4 of Section 3 Township G Range 76						
	┞╼┠╸┦╼┖╴┤ ┝╼┠╸┽╼┡╸┽ ┝━┠╸┽╼┞╸┽	_ _ _	Surface Location (150 ft.	o directions from frm (N/S) N Li		quarter section and d			
w - i - i		— E	WELL ACTIVI	TY	TYPE OF PERMI	T			
<u> </u>		_	Brine Dis	posal	Individual				
		_	<u>✓</u> Enhanced		Area	67			
		_	Hydrocari	bon Storage	Number of Wells	s <u>6 /</u>			
			Lease Name F	Fordson Coal Co).	Well Number KL-	142		
	S								
	INJECTIO	N PRESSURE	TOTAL VOLUME INJECTED		IJECTED	TUBING CASING ANNULUS PRESSURE (OPTIONAL MONITORING)			
MONTH YEAR	AVERAGE PSIG	MAXIMUM	PSIG B	BL	MCF	MINIMUM PSIG	MAXIMUM PSIG		
January-2010	0	0	0						
February-2010	0	0	0						
March-2010	641.67	800	379						
April-2010	716.07	800	581						
May-2010	673.91	700	294						
June-2010	0	0	0						
July-2010	0	0	0						
August-2010	0	0	0						
September-2010	0	0 0							
October-2010	0	0 0							
November-2010	0	0 0					ang sangsari s		
December-2010	0	0	0						
			Certific	ation		· · · · · · · · · · · · · · · · · · ·			
information is tr	ne penalty of law that I I I that, based on my inq ue, accurate, and comp e and imprisonment. (I	uiry of those in lete. I am awa	idividuals immedia re that there are si	tely responsible	for obtaining the i	information I believe	that the		

Signature

David Patterson / Vice President

Name and Official Title (Please type or print)

		United State	es Environmental Prote	otion Annual			
≎EPA		Omted State	Washington, DC 2046	O Agency		iA	
	ANNUAL D	ISPOSAL/INJ	ECTION WEL	L MONITOR	ING REPORT	20019	
Name and Address of	Existing Permittee		Name and	Address of Surface	Owner	-1)*	
Journey of	ile9 Hazard,	VV 111700		ner Hondri	•		
		K1 41 10 2 State	1410	County County	er Road, Crab	orchard, KY4041	
Locate Well and Section Plat - 64	Outline Unit on 0 Acres		Hucky	Leslie		Permit Number KY A0508	
	N	Surfac	e Location Description	r			
		1	1/4 of 1/4 of 1/4 of1/4 of Section 23 Township H Range 74				
	╌┠╌┽╼┝╌┽	Locate	well in two directions	from nearest lines	of quarter section and	drilling unit	
	·-	Surfac		<u> </u>			
│		- Locati	on BCO ft. frm (N/S) S O ft. from (E/W) W	Line of quarter s	ection		
w			ELL ACTIVITY	TYPE OF PE			
			Brine Disposal	Individua			
			Enhanced Recovery		*1		
		- !	Hydrocarbon Storage		vells Lg7		
│		_ Le	ase Name Formor	Handay	Well Number	KL-516	
			7 4.110	HOWIN	Well Number	1/r -710	
	S						
	IN JECTION				TUBING CASING	ANNULUS PRESSURE	
MONTH YEAR	AVERAGE PSIG	PRESSURE MAXIMUM PSIG	TOTAL VOLUME INJECTED		(OPTIONAL MONITORING)		
		MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG	
Jan. 09	675	750	0				
Few 09	237	* 1 L	And the second	o-			
March 09	r			2%			
A	V 2 4 5	. , , ,					
44:11 0.1	j		·				
May 09				1.			
Jun 19	<i>(</i>)	(**)	<i>i</i>				
-	6.7	K. 1	%. * . *				
<u> </u>			,)				
AUG. 09		Û					
53/4 /4	77	,)	,** ,				
001 01			- 1				
Nov 09	3/4.0	0	1001				
Dec Ol	73.00	9=0	11041				
		7 . **	10/11				
			Certification				
attachments and t	hat, based on my inqu	iry of those individual	s immediately respons	ible for about	an taga		
	e, accurate, and comple and imprisonment. (R		nere are significant per	nalties for submitting	ne information, I believing false information, in	e that the cluding the	
	,	o 40 Of N 144.32)	\sim				
ame and Offic at Title		Şig	nature \		Da	ate Signed	
Davis Farre	معد	11	Sourd/ Sus	\sim		2/2/10	

OMB No. 2040-0042

Approval Expires 12/31/2011

≎EPA	ANNUAL D	United S	-	n, DC 20460		RING RE	PORT	
Name and Address of Jetta Operating App P.O. Box 1269 Haz	Existing Permittee palachia, LLC			Name and Ad Farmer Her	ddress of Surfa			
Locate Well and Section Plat - 640		Sta K	ate entucky		County Leslie		Permit Nu KYA056	
	N		cate well in two	/4 of 1/4		Section 23	· · · · · · · · · · · · · · · · · · ·	<u> </u>
— — — — — — — — — — — — — — — — — — —		Loc	rface cation 3300 ft. f d 300 ft. from (WELL ACTIVI	(E/W) W Lir		ection.		
			Brine Disp	osal	│ Individ	fual		
	s		Lease Name F	armer Hendr	ix	Well N	lumber KL-5	516
	INJECTIO	N PRESSURE	TO	OTAL VOLUME	INJECTED		CASING A	NNULUS PRESSURE
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	ВІ	BL	MCF	MINIM	IUM PSIG	MAXIMUM PSIG
January-2010	924	950	1820					
February-2010	900.89	950	1559					
March-2010	859.63	925	1317					:
April-2010	741.07	900	1097					
May-2010	663.04	700	972					
June-2010	0	0	0					
July-2010	0	0	0					·
August-2010	0	0	0					
September-2010	0	0	0					
October-2010	0	0	0					
November-2010	0	0	0					
December-2010	0	0	0					
information is tru possibliity of fine	e penalty of law that I that, based on my inq e, accurate, and comp and imprisonment. (uiry of those individuals. Hete. I am aware th	duals immediat at there are sig	familiar with	de for obtainin	a the informati	on I boliovo	that the
lame and Official Title	(Please type or print)	I	Signature			$\overline{}$	Date	e Signed

David Patterson / Vice President

01/28/11

2/2/10

				OMB No. 2040-004	042 Approval Expire	es 4/30/07
≎EPA			es Environmental Prote Washington, DC 2046	60		
Name and Address of	ANNUAL D	ISPOSAL/INJ	ECTION WEL		NG REPORT	
Journey	Operating.LL	c	Rice	d Address of Surface (Brothers N	Owner Inerals	1310000
P.O. Box 1	1269 Hazar	rd. KY 41702	2 Paints	sville, KY 4	11204	
Locate Well and Section Plat - 640		State Kcr	ntucky	County	Permit	t Number AO5U8
	N	Surface	ce Location Description)F		
		1/		1/4 of 1/4 of Sec		
		Surface				d drilling unit
<u> </u>		Locatio	ion 1700 ft. frm (N/S) _1	⚠ Line of quarter se	ection	
w	1		ICO ft. from (E/W) V	Line of quarter section TYPE OF PER		
			Brine Disposal	_ Individual		
<u> </u>			Enhanced Recovery Hydrocarbon Storage	🔀 Area		
						VI rinn
	s		ease Name Rice Bro	others Mineral	15 Well Number	KL-542
	3					
	INJECTION	N PRESSURE	TOTAL VOLU	UME INJECTED	TUBING CASING	G ANNULUS PRESSURE L MONITORING)
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
Jan on	465	730	a	- :		
Found	225	.422	٥	***		
Hardrott	3,0	210	Le .	· ·		
April 01	1:12	2:-	7.			
Mills Ja	272		,			
J. E. O4		0	3			
7-60	0		2)			
1/22 = 1	0	0				
Car 69	0					
92t 39	0		0			
Nov of	0	0	0			
1000	75	~				
			Certification			
-ttachmente and t	The second second second					
information is true possibility of fine	that, based on my inqui e, accurate, and comple and imprisonment. (Re	.ry of those individuals etc. I am aware that the	s immediately respons here are significant pe	sible for obtaining the analties for submitting	e information, I belie g false information, i	ve that the ncluding the
	, , , , ,					
ame and Official Vitle (F	Please type or print)	Sigr	nature			Date Signed

VP

≎EPA	ANNUAL D		tes Environmental Pro Washington, DC 204 JECTION WEI	160	ING REPO)RT
Name and Address of Jetta Operating App P.O. Box 1269 Haz	f Existing Permittee palachia, LLC		Name ar Rice Br	nd Address of Surface rothers Mineals ille, KY 41204		/K1
Locate Well and Section Plat - 64	l Outline Unit on 0 Acres	State Ken	tucky	County Leslie	1	Permit Number KYA0568
 	N	Loca		1/4 of 1/4 of S	of quarter section	nship $^{ m G}$ Range $^{ m 76}$ on and drilling unit
w		E and	tion 1760 ft. frm (N/S) 1600 ft. from (E/W) W NELL ACTIVITY Brine Disposal Enhanced Recovery	TYPE OF PE	tion. RMIT	
		_	Hydrocarbon Stora	ge Number of V	,	_{eer} KL-542
		N PRESSURE	TOTAL VOL	UME INJECTED		ASING ANNULUS PRESSURE IONAL MONITORING)
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM I	PSIG MAXIMUM PSIG
January-2010	0	0	0			
February-2010	0	0	0			
March-2010	0	0	0			
April-2010	0	0	0			
May-2010	0	0	0			
June-2010	0	0	0			
July-2010	0	0	0			
August-2010	0	0	0			
September-2010	0	0	0			
October-2010	0	0	0			
November-2010	0	0	0			
December-2010	0	0	0			
information is tru	e penalty of law that I i that, based on my inqu e, accurate, and comp and imprisonment. (I	lete. I am aware that	ais immediately resno	neible for obtaining t	ha infarmation t	C. P. G. C. C.
ame and Official Title David Patterson / Vic	,	s	gnature	-		Date Signed 01/28/11

EPA Form 7520-11 (Rev. 12-08)

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United States Environmental Protection Agency Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT Name and Address of Existing Permittee Name and Address of Surface Owner 1316021 Journey Operating, LLC Dewis Lewis P.C. Box 1269 Hazard, KY 41702 Yeaddiss, KY 4777 County Permit Number Locate Well and Outline Unit on Kentucky Leslie Section Plat - 640 Acres KY A0548 Surface Location Description Ν 1/4 of ____ 1/4 of Section 3 Township G 1/4 of Locate well in two directions from nearest lines of quarter section and drilling unit Location $3^{1}50$ ft. frm (N/S) $\underline{\mathcal{N}}$ Line of quarter section and \$15t. from (E/W) \(\bigcup \) Line of quarter section. WELL ACTIVITY W TYPE OF PERMIT Brine Disposal Individual Enhanced Recovery Hydrocarbon Storage Number of Wells (07) Lease Name Fordson Coal Company Well Number KL s TUBING -- CASING ANNULUS PRESSURE INJECTION PRESSURE TOTAL VOLUME INJECTED (OPTIONAL MONITORING) AVERAGE PSIG MONTH MAXIMUM PSIG BBL MCF MINIMUM PSIG MAXIMUM PSIG 631 Certification attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibliity of fine and imprisonment. (Ref. 40 CFR 144.32) Name and Official Nitle (Please type or print) ignature Date Signed 2/2/10

		United Sta	ites Environm		ion Agency	JU42 Approv	al Expires	12/31/2011
≎EPA	ANNUAL D	ISPOSAL/IN	_	n, DC 20460 N WELL	MONITOR	RING REP	PORT	
Name and Address of Jetta Operating App P.O. Box 1269 Haza	Existing Permittee valachia, LLC				ddress of Surfac			
Locate Well and Section Plat - 640		State Ker	itucky		County Leslie		Permit Nu KYA056	
	N	į.	ace Location	•		3		
		Loca Surfa Loca andó	ite well in two ace tion 2150 ft. f	rm (N/S) N E/W) E Li	of1/4 of S rom nearest lines _ Line of quarter ne of quarter sec	s of quarter sec		Range 76
w			WELL ACTIVI Brine Disp Enhanced Hydrocarb	osal Recovery on Storage	TYPE OF PI	al Wells <u>67</u>	mber KL-(510
	INJECTIO	N PRESSURE	т	DTAL VOLUM	E INJECTED	TUBING - (O	- CASING A	NNULUS PRESSURE ONITORING)
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	ВІ	3L.	MCF	MINIMU	M PSIG	MAXIMUM PSIG
January-2010	0	0	0					
February-2010	0	0	0					
March-2010	625	650	37					
April-2010	640.71	750	871					
May-2010	586.96	650	611					
June-2010	0	0	0					
July-2010	0	0	0					
August-2010	0	0	0					
September-2010	0	0	0					
October-2010	0	0	0		,			
November-2010	0	0	0					
December-2010	0	0	0					
information is tru	e penalty of law that I that, based on my inq ie, accurate, and comp and imprisonment. (uiry of those individu plete. I am aware that	ıals immediat	familiar with	ble for obtaining	the information	n I haliava	that the
Name and Official Title		s	ignature				Date	e Signed
David Patterson / Vic	e President		/ \	,)				/28/11

United States Environmental Protection Agency
Washington, DC 20460

Ø EPA	ANNUAL D		ECTION WEL	[,] L MONITORIN	IG REPORT	
Name and Address of	rating. LLC			Address of Surface Ov	vner	
P.O. Box la	19 Hazard.	KY 41702	Cene	eral Delivery	Yeaddiss.	KY41777
Locate Well and Section Plat - 640			entucky	County	Parmit N	lumber 10568
	N		e Location Description	1		
		Surface)			
		Location	on 1875 ft. frm (N/S) <u>N</u> 5 ft. from (E/W) W	Line of quarter section Line of quarter section	ion 13100	78
w			ELL ACTIVITY	TYPE OF PERM	·	
<u> </u>			Brine Disposal	Individual		
		F I 1	Enhanced Recovery Hydrocarbon Storage	Area Number of Well	s (47	
│ 	_	_ Lea	ise Name Fordern	Coal Company		KL-630
	s		10,4301)	car company	well Number	NL 630
HOUTH		PRESSURE	TOTAL VOLU	ME INJECTED	TUBING CASING (OPTIONAL I	ANNULUS PRESSURE MONITORING)
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
<u>Jan 01</u>	675	100	6/8	-		
<u> </u>	<u>কণ্ঠ</u>	4 50	1130	· ·		
Machion	14-3	(5.5%)	701	κ		
Hym 37	978	<u>j</u> ou	And the second	Tigos .	-	
Mu, A	Cont ²	·	,			
JAY OF	Ō		2			
July 24	0	ر المراجع المر المراجع المراجع	D)			
NUTOF	0	0	0	~ .		
SERVI		0	Ō			
Da 69	5	5	$\overline{0}$	64		
NO DA	0	0	\overline{C}			
UKS 1	C	7		***		
		(Certification			
attachments and the information is true possibliity of fine a ame and Official Title (F	and imprisonment. (R	iry of those individuals ete. I am aware that th ef. 40 CFR 144.32)	immediately respons ere are significant per	ible for obtaining the i nalties for submitting f	nformation, I believe alse information, inc	that the luding the
DAVID PATT	\	Ngn	ature ATTO	_)		te Signed
PA Form 7520 14 (F) 0						2/2/10

Approval Expires 12/31/2011

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United States Environmental Protection Agency
Washington, DC 20460

Washington, DC 20460

ANNUAL DISPO	SAL/INJECTION	WELL MONITORING	G REPORT			
Name and Address of Existing Permittee Jetta Operating Appalachia, LLC P.O. Box 1269 Hazard, KY 41702	Ţ	Name and Address of Surface Owner Dewey Lewis Yeaddiss, KY 41777				
Locate Well and Outline Unit on Section Plat - 640 Acres	State Kentucky	County Leslie	Permit Number KYA0568			
N I I I I I	Surface Location De	scriptior of 1/4 of 1/4 of Section	n $\frac{3}{2}$ Township G Range 76			
	Surface Location 1875 ft. frm	irections from nearest lines of quarter sections) Which is the contraction of the contra				

WELL ACTIVITY
TYPE OF PERMIT

Brine Disposal
Individual

Enhanced Recovery
Area
Hydrocarbon Storage
Number of Wells 67

Lease Name Fordson Coal Company
Well Number KL-630

	INJECTION PRESSURE		TOTAL VOI	LUME INJECTED	TUBING CASING ANNULUS PRESSURE (OPTIONAL MONITORING)		
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG	
January-2010	0	0	0				
February-2010	0	0	0				
March-2010	0	0	0				
April-2010	0	0	0				
May-2010	0	0	0				
June-2010	0	0	0				
July-2010	0	0	0				
August-2010	0	0	0				
September-2010	0	0	0				
October-2010	0	0	0				
November-2010	0	0	0				
December-2010	0	0	0				

Certification

I certify under the penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (Ref. 40 CFR 144.32)

Name and Official Title (Please type or print)	Signature		Date Signed
David Patterson / Vice President			01/28/11
	Aus	14000) ""20/11

\$EPA

United States Environmental Protection Agency Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Name	and Address of Existing P	ermittee
Jetta	Operating Appalachia, L	LC
P.O.	Box 1269 Hazard, KY 4	1702

Name and Address of Surface Owner Kentucky River Coal Company P.O. Box 269 Hazard, KY 41702 1310022

Locate Well and Outline Unit on Section Plat - 640 Acres	State County Kentucky Leslie	Permit Number KYA0568
N	Surface Location Description 1/4 of1/4 of1/4 of : Locate well in two directions from nearest line Surface	
W = = = = = = = = = = = = = = = = = = =	Location ²⁰²⁵ ft. frm (N/S) S Line of quarter and ¹⁸⁰⁰ ft. from (E/W) W Line of quarter sec	ction.
	Brine Disposal Individu Enhanced Recovery Area Hydrocarbon Storage Number of	
├- ┤- ├- ┤- ┣- ┤ -├ ┤ -	Lease Name William G. Cornett	Well Number KP-906
s		

	INJECTIO	INJECTION PRESSURE		JME INJECTED	TUBING CASING ANNULUS PRESSU (OPTIONAL MONITORING)	
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
January-2010	903	950	2006			
February-2010	891.07	950	1946			
March-2010	832.22	900	1570			
April-2010	750.18	850	3188			
May-2010	702.17	775	3174			
June-2010	242.50	250	448			
July-2010	256.25	260	443			
August-2010	256.25	270	458			
September-2010	251.25	260	452			
October-2010	252.50	260	257			
November-2010	248.25	255	806			
December-2010	245	250	2277			

Certification

I certify under the penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (Ref. 40 CFR 144.32)

N 10/0 11711 2		
Name and Official Title (Please type or print)	Signature \	Date Signed
David Patterson / Vice President		01/28/11
	Jan Direct	

9	FPΔ	
~		

United States Environmental Protection Agency

SEPA	ANNUAL D		Washington, DC 20460 ECTION WEL		ING REPORT	
Name and Address of I	rading, LLC		Haye	Address of Surface	Wis	
1.0. Bex	1a69, Hazar		P.O. 1		tyden, KY 4	
Locate Well and (Section Plat - 640			tucky	County	Permit N KYA	umber 0568
	N		e Location Description		12 L	1 -11
		1/			ection <u>33</u> Township <i>F</i> of quarter section and c	
	- 	Surface		nom nearest mies	of quarter section and c	irilling unit
		Locatio	on 150 ft. frm (N/S) 5	Line of quarter s	section 3	(603)
w			ELL ACTIVITY	TYPE OF PE		
		_	Brine Disposal	Individu	al	
-+	- -+- -+-	1 1 .	Enhanced Recovery Hydrocarbon Storage	Area Number of V	Valle 1 a 7	
	-		·		1	L-755
L_i_i_i_	s		ase Name FurdSor	1 Coar Compo	the Well Number	VE 100
	INJECTION	PRESSURE	TOTAL VOLU	ME INJECTED		ANNULUS PRESSURE MONITORING)
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
Jan of	730	800	134	ζ		
Feb 09		*8.Jso	4.光			
Marcin 07	S. July	<u> </u>	. (
April 09		138 C 13		general and the second		
May ca	,					
PO MUT	O	Õ	0			
JULY 09	\mathcal{L}					
AUY 09	Û	٥	0	species .		
Sept 01	0		0			
OCT 09	years, named	Ĵ		(***		
NOV. E9	235	0	10			
Dec Of	Č			- ASSAL		
			Certification			
	nat, based on my inqu , accurate, and compl and imprisonment. (R		s immediately respons nere are significant pe	sible for obtaining (nalties for submitti	the information, I believe ng false information, inc	that the luding the
ame and Official Title (Please type or print)	Sign	nature am			te Signed は幻る
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01/28/11

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United States Environmental Protection Agency Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Name and Address of B Jetta Operating Appa P.O. Box 1269 Haza	alachia, LLC		l H	layes & El	dress of Surface va Lewis 59 Hyden, KY 4		13/6	623
Locate Well and (Section Plat - 640			ntucky		County Leslie		Permit No KYA05	
	N	Surfa	ace Location De	•				
			1/4 of 1/4 o		of 1/4 of Se	···		
	╼┠╸┽╼┝╌┼╌	Loca	te well in two di	irections fro	om nearest lines	of quarter sec	ction and d	Irilling unit
		Surfa						
│		_ Loca	tion 1⊃Ott. frm MAN ft. from (E/V	(N/S) inin	Line of quarter se e of quarter secti	ection		
w		1	WELL ACTIVITY	, y 4 2	TYPE OF PER			
l	_ L _ii_i_	_ -	Brine Dispos	al	Individua			
			 ∠ Enhanced Re		✓ Area	•		
		_	Hydrocarbon	Storage	Number of W	ells 67		
			ease Name Ford	dson Coal (Company	Well Nu	mber KL-	755
	S							
		PRESSURE	тотл	AL VOLUME	INJECTED	TUBING - (O	- CASING A PTIONAL N	NNULUS PRESSURE IONITORING)
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL		MCF	MINIMU	M PSIG	MAXIMUM PSIG
January-2010	0	0	0					
February-2010	0	0	0					
March-2010	0	0	0					
April-2010	0	0	0					
May-2010	0	0	0					
June-2010	0	0	0					
July-2010	0	0	0					
August-2010	0	0	0					
September-2010	0	0	0					
October-2010	0	0	0					
November-2010	0	0	0					
December-2010	0	0	0					
information is true possiblity of fine	penalty of law that I h hat, based on my inqu e, accurate, and comp and imprisonment. (F	ilry of those individu lete. I am aware that	ials immediately	miliar with t	le for obtaining tl	na informatiou	a I boliovo	that the
Name and Official Title (Please type or print)	S	glature	1		$\overline{}$	Dat	e Signed

David Patterson / Vice President

SEPA

United States Environmental Protection Agency Washington, DC 20460

Name and Address of	ANNUAL D	ISPOSAL/INJ	ECTION WELL			
JourneyOper	atina 110	-d 1/ 1/	_ K.R.	Address of Surfac		
4.0. 12ex		rd, ky 4170;	2 P.o. F	PUE XUE	Hazard, Ky	41761
Locate Well and Section Plat - 640	Acres	_ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	INFUCKY ce Location Description	Leslie	Permit	Number HV5US
	N I I I I			4 of 1/4 of \$	Section 2 Township	G Range 76
	-	Surface Locati	e well in two directions e on 2575ft. frm (N/S) LeOft. from (E/W) W L	from nearest lines	s of quarter section and	drilling unit
		- - <u> </u> <u> </u> <u> </u>	ELL ACTIVITY Brine Disposal Enhanced Recovery Hydrocarbon Storage	TYPE OF PE	al Wells	
	S	Le	ase Name Willig	m G. Corn	eff Well Number	KP-814
	INJECTION	PRESSURE	TOTAL VOLUM	IE INJECTED	TUBING CASING (OPTIONAL	ANNULUS PRESSUR MONITORING)
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
Jan 09	795	800	1337			
Fevol	77	४ 5७	1000 to			
March of	81.5		1300	<u> </u>		
HOIMA	780	11.	13.	year.		
May 09	 No1		147	C		
July 09	<u> </u>		0			
July 29			0			
May Gi	\mathcal{O})	0		
Comment of	0	O	0	Train .		
Oct - 09			2			
PC WC	0	0	a a	Sent Land Sent Comp		
LIPC OA	0		0	and the same of th		
			Certification			
possibility of fine a	nd imprisonment. (Re	ry of those individuals te. I am aware that th f. 40 CFR 144.32)	s immediately responsit ere are significant pena	ole for obtaining t lities for submittii	he information, I believe ng false information, inc	that the luding the
ne and Official Title (P	rease type or print)	sign	nature			te Signed
Form 7520-11 (Rev. 8-	01)		- I willen			LIX 110 .

≎EPA

United States Environmental Protection Agency Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Jetta Op	perating App	palachia, LLC ard, KY 41702		Kentucky	Address of Surface River Coal Comp 269 Hazard, KY 4	oany 1/2	10024
	ate Well and tion Plat - 640	Outline Unit on Acres	State Ken	ntucky	County Leslie	3	mit Number 'A0568
w		N	Locati Surfac Locati and N	te well in two directions	from nearest lines	ection 2 Townsh of quarter section : ection ion. RMIT	nip G Range 76
	† — - - - - - - - - - -			Hydrocarbon Storage	Number of W	Well Number	KP-814
			N PRESSURE	TOTAL VOLUM	ME INJECTED		ING ANNULUS PRESSURE IAL MONITORING)
MONTH	YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSI	G MAXIMUM PSIG
January-2	2010	0	0	0	-		
February-	-2010	0	0	0			
March-20	010	0	0	0			
April-201	10	0	0	0			

MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
January-2010	0	0	0			
February-2010	0	0	0			
March-2010	0	0	0			
April-2010	0	0	0			
May-2010	0	0	0			
June-2010	0	0	0			
July-2010	0	0	0			
August-2010	0	0	0			
September-2010	0	0	0			
October-2010	0	0	0			
November-2010	0	0	0			
December-2010	0	0	0			

Certification

I certify under the penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (Ref. 40 CFR 144.32)

Name and Official Title (Please type or print)		}		<u> </u>	
Maine and Official Title (Flease type or print)	S	ig\nature	\		Date Signed
David Patterson / Vice President				\	01/28/11
f .	< 1 <i>1</i>	\ \ \ \	١.	12 cm -	1 01/20/11

⊕EPA	ANNULAL		S Environmental Prote Washington, DC 2046	0		oh
Name and Address of	ANNUAL D Existing Permittee	ISPOSAL/INJ	Name and	Address of Contract	ING REPORT	4 6029
Journey op	perating, LLC		X.1	Rudress or surface	Hazard, K	·) ·
	····	rd, KY 41702 State	<u> </u>	box 249	Hazard, K	Y 41701
Locate Well and Section Plat - 640	Acres		Hucky	Leslie	Permit N KY F	10568
	N	Surfac	e Location Descriptio		ection 2 Township	
<u> </u>					of quarter section and	
h + +		Surfac	e			•
<u> </u>		and Ist	on (190 ft. frm (N/S) _ 00 ft. from (E/W) W	∆ Line of quarter s Line of quarter sect	ection ion.	
w _		- ,	ELL ACTIVITY	TYPE OF PE	RMIT	
		p	Brine Disposal Enhanced Recovery	Individua ∑ Area	al	
			Hydrocarbon Storag	e Number of W	vells <u>67</u>	
		Le	ase Name Willian	n G. Cornett	Well Number	KP 706
	S	I				
MONTH YEAR	<u></u>	N PRESSURE	TOTAL VOLU	IME INJECTED	OPTIONAL	ANNULUS PRESSURI MONITORING)
	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
Jan 09	810	170	1.041			
TCV OI		- 1				
March of	<u> </u>	*	1875	()		
Apar of	i -		į.			
May 24		-				
June 29	(_)		()			
7043	<u> </u>	~, /	*	#15 6 .		
Aug 09	0		O	197 L		
(1 - C)	0	0	0	77 ⁴² 5		
OC+ 68						
Non of	0	\overline{a}	Amount of the second			
142 33	774.6	Tic	775			
			Certification			
attachmente ex 4.0	and house to					
information is true	nat, based on my inqu , accurate, and compl and imprisonment. (R	iry of those individual ete. I am aware that the	s immediately respon: nere are significant pe	sible for obtaining ti nalties for submittir	he information, I believe ng false information, inc	that the
	•	er. 40 CFR 144,32)	~			
me and Official Title (F		Sign	nature		Da	te Signed
DAVID PATT	MN (~09119		\an 11)	1	مارد

United States Environmental Protection Ac

Julios States Environmental Protection Age	псу
Washington, DC 20460	

⇔EPA	ANNUAL D		Washington, DC 2046 ECTION WEL		ING REPORT	
Name and Address of E Journey Ope P.C. Box Jalo	xisting Permittee		Name and	Address of Surface		Jinni
Locate Well and (Section Plat - 640	Outline Unit on	State Ken	HUCKY	lestie	Permit N KYA	1umber 0568
	N T T T	Surface	Location Description	f	ection 9 Township	
		Surface Locatio and	well in two directions n 550 ft. frm (N/S) _1 75ft. from (E/W) W	from nearest lines Line of quarter sect	of quarter section and \emptyset section $\bigcap_{i \in \mathcal{A}} \widehat{\mathcal{A}}_i \widehat{\mathcal{A}}_i \widehat{\mathcal{A}}_i$	drilling unit
W			LL ACTIVITY Brine Disposal Enhanced Recovery Hydrocarbon Storage se Name	Number of V	al	< P. 1.12
L.,	S	PRESSURE	-		TUBING CASING	ANNULUS PRESSURE
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL BBL	ME INJECTED MCF	(OPTIONAL I	MONITORING)
Jan 07	730	ากจ	3217	0	MINIMON PSIG	MAXIMUM PSIG
Riol	858	Jan Co	2265			
Mores 39	941	[] _{{3}	* }\`\	0		
Ay 11 23		300	1			
May 21			4			
July 09		j j	<u> </u>			
7-41-24	<u> </u>					
III, M	$\frac{0}{2}$	<u> </u>	<u> </u>	, -aut, ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;		
<u> </u>	,_/	· Negative ·	No. of the Control of	(
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		V-				
attachments and th	at, based on my inqui accurate, and comple	ry of those individuals	Certification	ible for obtaining t	he information, I believe ng false information, incl	that the
_	·	ef. 40 CFR 144.32)	are significant per	raicies for submittir	ig talse information, inc	luding the
me and Official Tible (P	lease type or print)	sign	ature			e Signed

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United States Environmental Protection Agency
Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Name and Address of Existing Permittee Jetta Operating Appalachia, LLC P.O. Box 1269 Hazard, KY 41702

Name and Address of Surface Owner Kentucky River Coal Company P.O. Box 269 Hazard, KY 41702 13/0000

			1.0. Box 209 Hazaiu, KT 41	1702
	Locate Well and Outline Unit on Section Plat - 640 Acres	State Kentucky	County Leslie	Permit Number KYA0568
	N	Surface Location D	Descriptior 4 of 1/4 of1/4 of Sec	ition ⁹ Township ^G Range ⁷⁶
w	├─ ┤ ─├─ ┤ ─┣─ ┤ ─├─┤─│ ├─ ┤ ─├─ ┤ ─┣─ ┤ ─├─┤─│	Surface Location ²⁰²⁵ ft. fr	directions from nearest lines o m (N/S) N Line of quarter section N Line of quarter sections.	
			osal Individual	
	S			
	INJECTION PRESS	SURE TO	TAL VOLUME INJECTED	TUBING CASING ANNULUS PRESSURE

	INJECTION PRESSURE		TOTAL VOLU	TOTAL VOLUME INJECTED		(OPTIONAL MONITORING)		
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG		
January-2010	0	0	0					
February-2010	0	0	0					
March-2010	0	0	0					
April-2010	0	0	0					
May-2010	568.33	640	916					
June-2010	266.25	275	202					
July-2010	260	270	197					
August-2010	253.75	260	206					
September-2010	261.25	270	203					
October-2010	266.25	275	98					
November-2010	257.50	265	300					
December-2010	260	265	232					

Certification

I certify under the penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (Ref. 40 CFR 144.32)

Name and	Official	Title	(Please	type or print)
David Pa	tterson	/ Vio	e Presid	dent

Signature

Date Signed

01/28/11

United States Environmental Protection Agency

⊗EPA	ANNUAL D		Washington, DC 20460 ECTION WELL		ING REPORT	
Name and Address of I Journey (pe P.O. Boy lak	Existing Permittee		Name and	Address of Surface		41701
Locate Well and 6 Section Plat - 640			itucky	County	Permit, N	umber -0548
	N I I		e Location Description 4 of 1/4 of 1/	4 of 1/4 of S	ection $\underline{\underline{\lambda}}$ Township (2 2 7/4
<u> </u>					of quarter section and	
 	 	Surface		Line of quarter s	ection 131	0027
w		- ,	ELL ACTIVITY	TYPE OF PE		
			Brine Disposal Enhanced Recovery Hydrocarbon Storage			
		_ Lea	ise Name Willian	n G. Cornett	- Well Number	< P-1173
	S					
MONTH YEAR		PRESSURE	TOTAL VOLUM	ME INJECTED		ANNULUS PRESSURE MONITORING)
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	HE THE	MCF	MINIMUM PSIG	MAXIMUM PSIG
Few 09	334	200	4 7/6	<u> </u>		
Morno?		1,24		<u> </u>		
April 24	Trease .			· ·		
May 29	,					
J.,607	0	\Box	0	e re-		
July 09			in the second	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
Ney 04		(_)	471	jet.		
Secre Di	Û	0	308	, p. 2 =		
90x 09	<u> </u>	Ď		j.		
NOV DA			0	. %		
Dec on	517,66		4177	-		
			Certification			
possibliity of fine a	and imprisonment. (R		s immediately respons nere are significant per	ible for obtaining t nalties for submittir	he information, I believe ng false information, inc	e that the luding the
me and Official Vitle (I			nature		1	te Signed
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United States Environmental Protection Agency Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Name and Address of	f Existing Permittee	101 OUAL/III	Name and A	Address of Surface O		
Jetta Operating App P.O. Box 1269 Haz	palachia, LLC		Kentucky P.O. Box 2	River Coal Compa 269 Hazard, KY 41	iny 1702 /3	10027
Locate Well and Section Plat - 646	d Outline Unit on	State Kent	e ntucky	County Leslie	Permit KYA	Number
000.011.1.02	N N		ace Location Description	LCSIC	12.11.	1308
				4 of 1/4 of Sec		
	·	Surface	tion 790 ft. frm (N/S) <u>S</u>		ction	drilling unit
w	-	E V	WELL ACTIVITY	TYPE OF PERM	MIT	
			Brine Disposal Enhanced Recovery Hydrocarbon Storage	Individual V Area Number of Wel	lls <u>67</u>	
		L	ease Name William G. C	Cornett	Well Number K	P-1173
7-0/1	S			-	TURING CASING	S ANNULUS PRESSURE
MONTH YEAR		N PRESSURE	TOTAL VOLUM		(OPTIONAL	MONITORING)
January-2010	AVERAGE PSIG 823	MAXIMUM PSIG	6175	MCF	MINIMUM PSIG	MAXIMUM PSIG
February-2010	894.64					
	 	950	4669			
March-2010	892.59	950	4867			
April-2010	763.39	900	4870			
May-2010	691.30	750	3588			
June-2010	262.50	270	142			
July-2010	268.75	280	139			1
August-2010	261.25	270	145			
September-2010	258.75	270	143			
October-2010	0	0	0			
November-2010	245	250	385			
December-2010	263.33	265	649			
information is true	winds Dasca on my miga	lete. I am aware that t	Certification ined and am familiar with als immediately responsit there are significant pena	bla for obtaining the		41
ame and Official Title	(Please type or print)	Sic	gnature		I _D	ate Signed
David Patterson / Vice	e President					01/28/11

EPA Form 7520-11 (Rev. 12-08)

United States Environmental Protection Agency Washington, DC 20460

VEFA	ANNUAL D	ISPOSAL/INJ	ECTION WEL	L MONITOR	ING REPORT	
Name and Address o Journey O P.O. Box 15	f Existing Permittee PCPATING, LLC 169 Hazaro	1, KY 41702	Name and K. K. P. C.	Address of Surface	Owner Hazard KY	11701
	Outline Unit on	State Kei	Mucky	lestie	Permit N KYA	umber 05% €
	N	Surfac	e Location Description /4 of 1/4 of 1		ection 🐊 Township (_
		Surface Location	well in two directions by $\lambda \mathcal{D}$ ft. frm (N/S) $\lambda \mathcal{D}$ or $\lambda \mathcal{D}$ ft. from (E/W) $\lambda \mathcal{D}$	from nearest lines	of quarter section and	drilling unit
W	· — — — — — — — — — — — — — — — — — — —	- L	Brine Disposal Enhanced Recovery Hydrocarbon Storage	Number of W	al	KP- Hall
LL.	S		<u> </u>	i C. Cemai		<u> </u>
MONTH YEAR	INJECTION AVERAGE PSIG	PRESSURE	TOTAL VOLU	ME INJECTED	TUBING CASING (OPTIONAL I	ANNULUS PRESSURE MONITORING)
Jan 09	LI3	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
Fev. 09	134	9.65				
Macan 27	414		4.25			
Aver Di	÷ = 7		2 _	1' 1		
May De	320					
Jan 3	0	9	0			
<u>たし、インで</u>	<u> </u>		٥			
Av Da	0	0	0	1		
Contract	0	0	<u></u>	<i>39</i>		
Oct. 09			*	in the second se		
NOV 59	600.07	0		7.50		
Urc 09	401.41	750		>		
attachments and t information is true possibliity of fine	ihat, based on my inqui e, accurate, and comple and imprisonment. (Re	ry of those individuals	Certification s immediately respons ere are significant per	ible for obtaining th nalties for submittin	ne information, I believe g false information, incl	that the luding the
A Form 7520-11 (Rev.	2015	Sign	nature 2770x			e Signed

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United States Environmental Protection Agency Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Name and Address of Existing Permittee Jetta Operating Appalachia, LLC P.O. Box 1269 Hazard, KY 41702

Name and Address of Surface Owner Kentucky River Coal Company P.O. Box 269 Hazard, KY 41702

130028

Locate Well and Outline Unit on Section Plat - 640 Acres	Kentucky	County Leslie	Permit Number KYA0568
N	Surface Location Description 1/4 of 1/4 of 1/4 Locate well in two directions fr Surface Location 120 ft. frm (N/S) 5 and 1010 ft. from (E/W) W Lin	Line of quarter section	
W	WELL ACTIVITY Brine Disposal Enhanced Recovery Hydrocarbon Storage Lease Name William G. Co	TYPE OF PERMIT Individual Area Number of Wells 67	mber KP-1174
s			

	INJECTIO	N PRESSURE	TOTAL VOLU	JME INJECTED	TUBING CASING ANNULUS PRESSURE (OPTIONAL MONITORING)	
MONTH YEAR	R AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
January-2010	753	890	360			
February-2010	752.86	860	385			
March-2010	691.85	775	457			
April-2010	590.18	700	314.50			
May-2010	543.91	600	257			
June-2010	0	0	0			
July-2010	0	0	0			
August-2010	0	0	0			
September-2010	0	0	0			.,,
October-2010	0	0	0			
November-2010	0	0	0			
December-2010	0	0	0			

Certification

I certify under the penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (Ref. 40 CFR 144.32),

Name	and	Official	Title	(Please	type	or	print)
1							

David Patterson / Vice President

Signature

Date Signed

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United States Environmental Protection Agency

vinting D	1/4 c	Name and K. R. R. P.G. E			1701
	1/4 c	ocation Description	Bex 249 County Lestie	Hazard, KY	+1701
	1/4 c	ocation Description	County 1.45/ic	Hazard, KY	£1701
	1/4 c	ocation Description	1.ls/it	Permit N	
N -	1/4 c	•	1 2 701 - 0	KYA	umber 10508
				2	
	Ilocate w	of 1/4 of 1/	4 of 1/4 of S	ection 2 Township	ϵ Range 7ϕ
	Surface	en in two directions	from nearest lines	of quarter section and o	Irilling unit
	Location	160 ft. frm (N/S) 5	_ Line of quarter s	ection	a a 0 A
-	and 1060	ft. from (E/W) 📒 L	ine of quarter sect	ion. 196	1001
	E WELI	ACTIVITY	TYPE OF PE	RMIT	
╺┠╸┽╼┝╶┽╺				ıl	
- -	-	thanced Recovery	Area Number of M	10112 /07	
-	1			•	15
	Lease	Name William	G. Cornett	Well Number	<u>(r) 1252</u>
S					
211.15.05.10.11				TUBING CASING	ANNIII IIS PRESSIDE
AVERAGE PSIG	PRESSURE MAXIMUM PSIG			(OPTIONAL I	MONITORING)
394	800)	· ·	WINIMUM PSIG	MAXIMUM PSIG
460	- 1 5 mgs	F L- 4	<u> </u>		
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	C		34+ 5		
	Ce	ertification			
t, based on my inqui accurate, and comple d imprisonment. (Re	ry of those individuals in te. I am aware that there ef. 40 CFR 144.32)	nmediately responsi e are significant pen	ble for obtaining th alties for submittin	ne information, I believe g false information, incl	that the uding the
ease type or print)	Signat	ure		Dat	e Signed
se yo		ALL Jarren	\triangle		2/2/10
	t, based on my inquinccurate, and compled imprisonment. (Resease type or print)	INJECTION PRESSURE AVERAGE PSIG MAXIMUM PSIG 394 SOO 394 SOO Continued and locolor well. Bright High Lease S INJECTION PRESSURE AVERAGE PSIG MAXIMUM PSIG 394 SOO Continued and locolor well. Continued and locolor well. Indicate the second and locolor well. Continued and locolor well. Indicate the second and locolor well. Continued and locolor well. Indicate the second and locolor well. Continued and locolor well. Indicate the second and locolor well. Continued and locolor well. Indicate the second and locolor well. Continued and locolor well. Indicate the second and locolor well. Continued and locolor well. Indicate the second and locolor well. Continued and locolor well. Indicate the second and locolor well. Continued and locolor well. Indicate the second and locolor well. Continued and l	Location (160 ft. frm (N/S) Sand (160 ft. frm (EW) E L WELL ACTIVITY Brine Disposal Enhanced Recovery Hydrocarbon Storage Lease Name William S INJECTION PRESSURE TOTAL VOLUM AVERAGE PSIG MAXIMUM PSIG BBL 394 Company of the second	Location (160 ft. frm (N/S) S. Line of quarter seat and 160 ft. from (E/W) E. Line of quarter seat well. ACTIVITY WELL ACTIVITY Brine Disposal Enhanced Recovery Area Hydrocarbon Storage Number of W. Lease Name William G. Cornett S. INJECTION PRESSURE TOTAL VOLUME INJECTED AVERAGE PSIG MAXIMUM PSIG BBL MCF 39 1 Cornett Certification It, based on my inquiry of those individuals immediately responsible for obtaining it incurate, and complete. I am aware that there are significant penalties for submitting dimprisonment. (Ref. 40 CFR 144.32) Pase type or print) Signature	Location (AGO R. frm (N/S) S. Line of quarter section and (AGO R. frm (N/S) Eline of quarter section. Continue Eline of quarter section Continue Continu

United States Environmental Protection Agency

⊗EPA	ANNUAL [DISPOSAL/II		n, DC 20460 N WELL MON	IITORING RE	=PORT	
Name and Address of Jetta Operating App P.O. Box 1269 Haz	FExisting Permittee Dalachia, LLC			Name and Address of Kentucky River Co P.O. Box 269 Haza	of Surface Owner	1310	1029
Locate Well and Section Plat - 64	Outline Unit on 0 Acres	k	ate Kentucky	County Leslie		Permit I KYA0	
	N			•	1/4 of Section 2	Township ⁽	G Range 76
 	·─┠┽┷┾╅ ╼┠┽╼┝┤	Su Lo	ırface	frm (N/S) <u>S</u> Line of			-
w		E -	WELL ACTIVITY Brine Disp Enhanced Hydrocarb	Recovery	PE OF PERMIT Individual Area nber of Wells 67		
	- - - - - - - - - -		Lease Name V	Villiam G. Cornett		Number KP	-1252
	INJECTIO	N PRESSURE	TC	OTAL VOLUME INJECT	TUBING	G CASING (OPTIONAL)	ANNULUS PRESSURE MONITORING)
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BE	BL M		NUM PSIG	MAXIMUM PSIG
January-2010	0	0	0				
February-2010	0	0	0				
March-2010	0	0	0				
April-2010	0	0	0				
May-2010	0	0	0				
June-2010	0	0	0				
July-2010	0	0	0			····	
August-2010	0	0	0				
September-2010	0	0	0				
October-2010	0		0				
November-2010	0	0	0				
December-2010	0	0	0				
information is true	penalty of law that I i hat, based on my inqi , accurate, and comp and imprisonment. (f	lete. I am aware tha	Certifica mined and am f duals immediate at there are sign	tion familiar with the inform ally responsible for obt reficant penalties for s	nation submitted in t aining the informati ubmitting false info	this docume on, I believe rmation, incl	nt and all that the uding the
me and Official Title (Signature			I D-4	o Signod
Pavid Patterson / Vice	President					į į	e Signed /28/1

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United States Environmental Protection Agency

Washington, DC 20460 ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT Name and Address of Existing Permittee Name and Address of Surface Owner Journey operating, Lic K.R.C.C P.C. Box 1249 Hazard, KY 41702 P.O. Bex 269 Hazard, KY 41701 County Locate Well and Outline Unit on Permit Number Section Plat - 640 Acres Leslie KYAUTLO8 Surface Location Description N 1/4 of Section 1 Township G Range 75 1/4 of ____ Locate well in two directions from nearest lines of quarter section and drilling unit Location 1190 ft. frm (N/S) \underline{M} Line of quarter section 130030 and 24 (bft. from (E/W) E Line of quarter section. W WELL ACTIVITY Ε TYPE OF PERMIT Brine Disposal Individual Area Enhanced Recovery Hydrocarbon Storage Number of Wells 67 Lease Name William G. Canott Well Number s TUBING -- CASING ANNULUS PRESSURE

INJECTION PRESSURE			PRESSURE	TOTAL VOL	UME INJECTED	TUBING CASING ANNULUS PRESSURE (OPTIONAL MONITORING)		
MONTH Y	EAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG	
Jan 00	ì	750	810	2910	0			
FOU OF		837	875	3400				
Marin	PC	851	1000	3397				
Aynio	į.	4.2%	1 m					
Mull	1							
June on	<u> </u>	9	O.	6-10	, 500			
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Certification

attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the

Name and Official Fittle (Please type or print)		
LAVIA LATTORED VO	Signature	Date Signed
EPA Form 7520-11 (Rev. 8-01)	An 10:10m	2/2/10

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United States Environmental Protection Agency Washington, DC 20460

	ANNUAL D	DISPOSAL/IN.	JECTION	WELL	MONITOR	RING REF	ORT		
Name and Address o Jetta Operating Ap P.O. Box 1269 Haz	palachia, LLC			Kentucky I	ddress of Surface River Coal Com 269 Hazard, KY	pany	1310	130	
Locate Well and Section Plat - 64	d Outline Unit on 10 Acres	State Ker	ntucky	······	County Leslie		Permit N KYA05		
	N	Surfa	ace Location I	Descriptior					
			1/4 of 1/4	4 of 1/4	of 1/4 of S	Section 9 To	ownship G	Range 76	
 		Surfa	Locate well in two directions from nearest lines of quarter section and drilling unit Surface Location II90 ft. frm (N/S) N Line of quarter section and AHOft. from (E/W) E Line of quarter section.						
W	· — — — — — — — — — — — — — — — — — — —	_	WELL ACTIVIT Brine Dispo ∠ Enhanced i Hydrocarbo	osal Recovery	TYPE OF PE Individu: Area Number of V	al			
	s	L	ease Name W	'illiam G. C	ornett	Well Nu	mber KP-	1285	
	INJECTIOI	N PRESSURE	то	TAL VOLUME	E INJECTED	TUBING	CASING A	ANNULUS PRESSURI MONITORING)	
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	ВВ	L	MCF	MINIMUI	W PSIG	MAXIMUM PSIG	
January-2010	0	0	0						
February-2010	0	0	0						
March-2010	0	0	0						
April-2010	0	0	0						
May-2010	0	0	0						
June-2010	0	0	0						
July-2010	0	0	0						
August-2010	0	0	0						
September-2010	0	0	0						
October-2010	0	0	0						
November-2010	0	0	0						
December-2010	0	0	0						
information is tru	e penalty of law that I h that, based on my inqu e, accurate, and compl and imprisonment. (R	lete. I am aware that		amiliar with t					
ame and Official Title	(Please type or print)		nature	\ 					
David Patterson / Vic	e President	17		\		\		e Signed /28/11	

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United States Environmental Protection Agency Washington DC 20460

VEFA	ANNUAL D	ISPOSAL/INJE	ECTION WELI	, _ MONITORI	ING REPORT	13/0031		
Name and Address of Journey Ope	Existing Permittee			Address of Surface				
Journey Operating, LLC P.O. Box 1249. Hazard, KY 41702 Locate Well and Outline Unit on Name and Address of Surface Owner Harlan Coots P.O. Box 9, Yeard S. KY 41777 County Permit Number								
Locate Well and Outline Unit on Section Plat - 640 Acres State Konflucky County Permit Number Kir O568								
	N		Location Description			3		
		1/- Locate			ction <u>3</u> Township (
-++		Surface				arining anit		
		Locatio	n 750 ft. frm (N/S) <u> </u>	Line of quarter section	ection 13	0031		
w		E WE	LL ACTIVITY	TYPE OF PER	RMIT			
			Brine Disposal Enhanced Recovery	_ Individual	I			
	_ 	_	Hydrocarbon Storage	Number of We				
		Lea	se Name Harold 1	B. Rice, et al	Well Number	K-338		
	S							
	INJECTION	I PRESSURE	TOTAL VOLUM		TUBING CASING	ANNULUS PRESSURE		
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL BBL	MCF	MINIMUM PSIG	MONITORING) MAXIMUM PSIG		
Tin 09	742	ଟିଠତ	100%	Ô		WAXING FOR		
RUDA	744	450	1013					
March 07	Burg	ico -	1	e e e e e e e e e e e e e e e e e e e				
April 09	71-1		- 1					
May 09	<u>.</u>	**** ***	1 <u>1</u> 2	, , , , , , , , , , , , , , , , , , ,				
Jury 09				Joseph 1				
July 09	<u> </u>	ن ا	2	7°%.				
Aug. of			Ō					
(0 1/2)	0	0	2	-1 %				
CC 29	e de la companya de l			3 1				
New 29			0					
10 09 G		5°).						
		(Certification					
possiblity of fine a	nd imprisonment. (Re	ry of those individuals		ole for obtaining the alties for submitting	e information, I believe g false information, incl	that the uding the		
me and Official Title (P	~	Signa	ature \(\)		Date	e Signed		
Jav PATTER	مع		wast / mer	\supset	2	12/10		

Date Signed 01/28/11

OMB No. 2040-0042

Approval Expires 12/31/2011

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United States Environmental Protection Agency

Washington, DC 20460

 	ANNUAL	DISPOSA	L/INJEC	TION	WELL	MONIT	ORING	REPO	OR1

Name and Address of Existing Permittee Jetta Operating Appalachia, LLC P.O. Box 1269 Hazard, KY 41702

Name and Address of Surface Owner Harlan Coots P.O. Box 9 Yeaddiss, KY 41777

	te Well and Outline Unit on on Plat - 640 Acres	State Kentucky	1	County Leslie	Permit Number KYA0568
w	N	1/4 of Locate wel Surface Location 15 and \$50 ft WELL Brit	I in two directions from To ft. frm (N/S) N Line Trom (E/W) E Line ACTIVITY The Disposal Banced Recovery Trocarbon Storage	of quarter section. TYPE OF PERMIT Individual Area Number of Wells 67	Township G Range 76
		Lease I	lame Harold B Rice, I	ETAL Well	Number K-338
<u> </u>	S	,			

	INJECTIO	N PRESSURE	TOTAL VO	LUME INJECTED	TUBING CASING ANNULUS PRESSURE (OPTIONAL MONITORING)		
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG	
January-2010	0	0	0				
February-2010	0	0	0				
March-2010	516.67	800	416				
April-2010	478.57	850	989				
May-2010	746.74	800	629				
June-2010	0	0	0				
July-2010	0	0	0				
August-2010	0	0	0				
September-2010	0	0	0				
October-2010	0	0	0				
November-2010	0	0	0				
December-2010	0	0	0				

Certification

I certify under the penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (Ref. 40 CFR 144.32)

			1	\	1	
	Name and Official Title (Please type or print)	S	gature			<u> </u>
	David Patterson / Vice President	١,				
i		•	΄ λ Δ.	A \	\ h	1

OMB No. 2040-0042 Approval Expires 4/30/07 United States Environmental Protection Agency Name and Address of Existing Permittee Name and Address of Surface Owner Journey operating, LLC P.O. Box 1269, Hazard, KY 41702 Stanky & Oma Wilson, et al 147 Right Fork Drive, Yeardiss, KY 41777

County Permit Number

1503C Locate Well and Outline Unit on Kentucky Section Plat - 640 Acres Surface Location Description ___ 1/4 of Section 3 Township H Range 70 1/4 of Locate well in two directions from nearest lines of quarter section and drilling unit 4491818 Location (90 ft. frm (N/S) 3 Line of quarter section and ft. from (E/W) W Line of quarter section. W WELL ACTIVITY TYPE OF PERMIT Brine Disposal Individual Enhanced Recovery Area Hydrocarbon Storage Number of Wells 67 Lease Name Susied Ow Rice Tr. Well Number TUBING -- CASING ANNULUS PRESSURE INJECTION PRESSURE TOTAL VOLUME INJECTED (OPTIONAL MONITORING) MONTH AVERAGE PSIG MAXIMUM PSIG BBL MCF MINIMUM PSIG MAXIMUM PSIG 799 416 800 1135 Certification

attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (Ref. 40 CFR 144.32)

Name and Official Title (Please type or print) Asia America VP	Signature	Date Signed
EPA Form 7520-11 (Rev. 8-01)	1	-1-11

Approval Expires 4/30/07

2	EPA	
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Name and Address of Existing Permittee

United States Environmental Protection Agency Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Name and Address of Surface Owner Kentucky River Coal Con

P.	Journey Operating, LLC C.Box 1269, Hazard, KY4	ไเางล	Kenti P.o. Bo	icky River Co ox 269. Hazar	oal Compan d. KY 47102	4 131	
	Locate Well and Outline Unit on Section Plat - 640 Acres		State Kentucky	County	Permit	Number AU548	
	N]	Surface Location Description 1/4 of 1/4 of 1	/4 of 1/4 of Secti			16
			Surface Location 1 00ft. frm (N/S) Sand 1400ft. from (E/W)	_ Line of quarter sect	tion	drilling unit	
w		E	WELL ACTIVITY Brine Disposal Enhanced Recovery Hydrocarbon Storage	TYPE OF PERM Individual Area Number of Well			
			Lease Name Honry		Well Number	K-163	>?
	s	•					
MON	INJECTION P	RESSURE	TOTAL VOLU	ME INJECTED	TUBING CASING (OPTIONAL	ANNULUS PRI MONITORING)	ESSURE

		INJECTION	PRESSURE	TOTAL VOLU	JME INJECTED	TUBING CASING (OPTIONAL	TUBING CASING ANNULUS PRESSURE (OPTIONAL MONITORING)		
MONTH YEAR JGO 04		AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG MAXIMUM PSIG			
		775	m	Ö	0				
(- 1)		0	0	0	0				
March	: 54	1 2	A 2						
April	. ૭૧		75,3	3511	Ô				
May	<u>09</u>	- (C				
Jurie	JA	2.	Ð.	9					
7-1-	5-1	-	Ź	5					
Ass		<u> </u>	-	ĺ					
	21	Ü	Ü		2				
<u>Cci</u>	<u> 19</u>	0	Ú.	D.					
NOW	C.3	- O	0	0	,				
Den	5A	.A							

Certification

attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibliity of fine and imprisonment. (Ref. 40 CFR 144.32)

Name and Official Title (Please type or print)	Signature	
	dignature	Date Signed
Laurs tamores VA	Day boom	3/- 10
	JAT I Alto	212/10
EPA Form 7520-11 (Rev. 8-01)		

Date Signed

01/28/11

		United St	atoo Envisore		OMB No. 2040-004	2 Approval Expires	12/31/2011	
\$EPA	431311114			n, DC 20460				
Name and Address o	ANNUAL [DISPOSAL/IN	IJECTIO					
Jetta Operating Ap P.O. Box 1269 Ha	palachia, LLC			Stanley &	ddress of Surface O Oma Wilson, ETA Fork Drive, Yeadd	L		
Locate Well and Outline Unit on Section Plat - 640 Acres		Ke	State County Kentucky Leslie		· ·	i similari		
	N		face Location			22		
		Loc Suri	ate well in two face ation b90 ft. f	odirections for the firm (N/S) S	rom nearest lines of Line of quarter sec ne of quarter section), 		
Brine Disposal Individua ✓ Enhanced Recovery ✓ Area					TYPE OF PERM I Individual V Area Number of Wel			
			Lease Name S	usie & Ova	Rice, JR	Well Number LW	F1-101	
	S							
INJECTION PRESSURE TOTAL VOLUME INJEC					INJECTED	TUBING CASING ANNULUS PRESSURE CTED (OPTIONAL MONITORING)		
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	ВІ	3L	MCF	MINIMUM PSIG	MAXIMUM PSIG	
January-2010	0	0	0					
February-2010	0	0	0					
March-2010	0	0	0					
April-2010	0	0	0					
May-2010	0	0	0					
June-2010	0	0	0					
July-2010	0	0	0					
August-2010	0	0	0					
September-2010	0	0	0					
October-2010	0	0	0					
November-2010	0	0	0					
December-2010	0	0	0					
		L	Certifica	ition				
information is tru	e penalty of law that I I that, based on my inq ue, accurate, and comp e and imprisonment. (I	lete. I am aware that	nined and am	familiar with t				

gnature

David Patterson / Vice President

Name and Official Title (Please type or print)